



ANNUAL REPORT  
on the  
PUBLIC HEALTH  
of  
WORCESTERSHIRE.  
1933.

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MAY 1934

by  
WYNDHAM PARKER, M.C.,  
M.B., Ch.B. (Edin.), D.P.H. (Lond).  
County Medical Officer.







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County Medical Officer.

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## WORCESTERSHIRE COUNTY COUNCIL.

TO THE CHAIRMAN AND MEMBERS OF THE COUNTY COUNCIL.

1. I have the honour to submit my report on the health of the County during the year 1933.

2. The references and statistics in this report refer generally to the County as altered on the 1st April 1933 but the Registrar General's figures for the first three months of the year have been included separately for each abolished district. It will be noticed that two Urban Districts, two Rural Districts and parts of two other Rural Districts ceased to exist as separate authorities on that date.

3. These alterations have resulted in a good deal of additional work being added to the staffs of altered districts which may account for the fact that copies of the Reports of District Medical Officers of Health for the year 1933 were received in a number of instances very much later than in previous years.



## SECTION A.

**Statistics and Social Conditions of the Area.**

Area in acres (31st December, 1933)	—	—	—	438,221
Population, Census 1931	—	—	—	308,787
Registrar-General's estimate of resident population, 1933	—	—	—	315,600
Rateable Value (1st April, 1934)	—	—	—	£1,484,017
Sum represented by a penny rate	—	—	—	£5,689

		Male.	Female.	Total.
Live Births	{ Legitimate	— 2,182	2,124	4,306
	{ Illegitimate	— 90	92	182
Birth-rate per 1,000 of estimated resident population				14·2

		Male.	Female.	Total.
Stillbirths	— — —	95	95	190
Rate per 1,000 total (live and still) births				40

		Male.	Female.	Total.
Deaths	— — —	1,973	1,826	3,799

Death-rate per 1,000 of estimated resident population 12·0

Deaths from Puerperal Sepsis	10	Rate per 1,000 total (live and still) Births	2·14
------------------------------	----	--	------

Deaths from other Puerperal Causes	10	do.	—	2·14
------------------------------------	----	-----	---	------

Total	— — 20	do.	—	4·28
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Death-rate of Infants under one year of age :—

All infants per 1,000 live births	— — —	64
Legitimate infants per 1,000 legitimate live births	—	62
Illegitimate infants per 1,000 illegitimate live births		93
Deaths from Measles (all ages)	— — —	22
Deaths from Whooping Cough (all ages)	— — —	7
Deaths from Diarrhoea (under 2 years of age)	—	34




URBAN DISTRICTS.		Area in Acres.	POPULATION.			Net Birth Rate Per 1,000 esti- mated popu- lation.	Total No. of Births (net)	Illegitimate Births.	Total No. of Stillbirths.	Illegitimate Stillbirths.	Net Death Rate per 1,000 esti- mated popu- lation. (a)	No. of Deaths Registered (Net).	Infant Mortality, i.e., Deaths of infants under 1 year per 1,000 Births registered.	Deaths Under 1 year.		Causes of Death during Year 1935 (Civilians only). (b)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
			Total.	Illegitimate.	Typhoid & Paraty- phoid Fevers.									Smallpox.	Measles.	Scarlet Fever.	Whooping Cough.	Diphtheria.	Influenza.	Encephalitis Lethargica.	Cerebro Spinal Fever.	Tuberculosis of Respiratory System.	Other Tuberculous Diseases.	Cancer Malignant Disease.	Syphilis.	General Paralysis of the insane.	Diabetes.	Cerebral Haemor- rage, etc.	Heart Disease.	Aneurysm.	Other Circulatory Diseases.	Bronchitis.	Pneumonia (all forms) Other Respiratory Diseases.	Peptic Ulcer.	Diarrhoea, etc. (c)	Appendicitis.	Cirrhosis of Liver.	Other Diseases of Liver, etc.	Other Digestive Diseases.	Acute and Chronic Nephritis.	Puerperal Sepsis.	Other Puerperal causes Congenital Debility and Malformation including Premature Birth.	Senility.	Suicide.	Other Deaths from Violence.	Other defined diseases Causes, ill-defined or unknown.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
Bewdley Borough	-	-	3757	4275	3965	4345	15.6	62	3	2	...	11.1	44	81	5	...	...	...	...	...	...	1	...	...	1	1	5	...	...	1	2	6	...	3	3	2	...	...	1	...	...	...	1	4	...	...	2	1	2	5	(d)	3	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Bromsgrove	-	-	9248	21652	18580	21582	15.4	286	7	10	1	11.7	217	38	11	...	1	...	1	2	1	2	9	...	...	5	3	24	1	2	6	13	42	1	7	5	21	4	2	1	...	...	...	3	6	1	2	5	11	8	10	18	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Bromsgrove North	-	-	...	...	2725	...	11.0	30	1	2	...	12.1	33	33	1	...	...	...	2	...	...	...	1	...	...	2	...	6	...	...	...	1	8	...	1	1	3	1	...	...	...	...	...	1	...	...	...	2	...	2	2	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
Droitwich Borough	-	-	1729	4809	4394	4452	12.1	53	3	1	...	15.5	68	38	2	1	...	...	...	...	...	5	...	...	1	1	9	...	...	1	8	10	...	...	2	3	...	...	1	...	...	...	3	3	...	...	1	7	1	2	9	1																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				
Evesham Borough	-	-	3958	10605	10610	11091	16.3	173	5	3	...	13.4	142	23	4	...	...	...	...	1	...	3	6	...	...	8	...	18	1	...	3	6	39	1	2	5	11	1	3	1	...	2	1	4	3	...	...	3	10	1	2	7	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Halesowen	-	-	5245	30407	31910	31710	14.0	446	10	14	2	10.2	325	81	36	...	...	...	...	3	...	1	14	3	...	20	8	47	...	...	8	14	76	...	10	9	9	2	3	1	2	...	1	7	6	3	2	29	14	3	11	19	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Kidderminster Borough	-	-	4615	29520	29990	30210	13.4	403	28	22	...	12.7	380	97	39	5	3	...	2	1	2	...	13	1	...	20	4	41	...	1	3	27	76	2	21	26	26	10	5	6	4	2	...	3	14	1	...	11	6	5	13	30	1																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Lye and Wollescote	-	-	...	...	3053	...	13.4	41	...	3	...	14.7	45	73	3	...	...	...	...	...	...	7	...	...	4	...	5	...	...	1	1	7	...	2	2	1	...	2	...	...	...	1	3	...	...	1	4	...	...	4	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
Malvern	-	-	7279	16601	17450	17690	11.3	198	20	10	1	14.3	249	66	13	...	...	...	...	...	...	8	...	1	15	4	36	...	1	1	14	60	2	25	9	10	1	1	...	...	2	6	8	...	...	7	12	2	9	14	1																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
Oldbury	-	-	3306	36580	39360	39560	17.3	680	13	25	...	10.5	414	90	61	1	...	...	7	4	1	1	17	2	2	23	2	48	2	2	5	21	58	...	16	33	42	5	2	9	...	...	2	7	6	2	...	28	10	10	15	31	1																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Redditch	-	-	12070	22235	21320	22024	11.8	252	5	11	...	11.5	245	52	13	...	...	...	1	...	...	6	10	...	1	14	2	34	1	2	5	13	62	1	8	5	7	1	3	1	...	2	2	4	9	2	...	10	16	2	10	11	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Stourbridge Borough	-	-	4214	33140	31080	34420	13.0	403	13	22	2	11.1	346	57	23	1	...	...	5	...	...	...	11	...	...	24	4	42	2	2	6	24	80	1	14	5	24	...	2	2	4	...	2	10	8	...	2	12	18	3	12	27	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Stourport	-	-	3117	7476	6915	7280	16.5	114	6	3	...	10.8	75	70	8	...	...	...	2	1	...	...	1	1	...	...	2	9	...	...	1	2	11	...	3	9	5	1	...	2	2	1	...	2	1	...	...	3	6	...	3	7	...																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
Totals	-	-	58538	217300	221350	224364	14.2	3141	114	128	6	11.7	2583	70	219	8	4	...	20	12	4	13	103	7	4	137	31	324	7	10	41	146	535	8	112	114	164	26	23	25	12	7	10	51	72	9	6	112	117	37	94	182	4																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																			
RURAL DISTRICTS.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								

(a) Arrived at by excluding deaths of non-residents and including deaths of persons properly belonging to the Districts, but who died outside these districts.  
(b) These figures are supplied by the Registrar-General.  
(c) Under 2 Years.  
(d) Include death from Polioencephalitis.

ENGLAND AND WALES:

Birth Rate	-	-	-	14.4	per 1000
Death Rate	-	-	-	12.3	" "
Infant Mortality Rate	-	-	-	64	" "



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4. The statistical data for the year 1933 are not exceptional.

5. The incidence of infectious disease in the Autumn months was high ; the details will be found under the appropriate headings.

6. The birth-rate of Worcestershire continues to fall and has reached a record low level of 14·2 per 1,000. It is interesting to note that the average birth-rate for the Rural Districts was actually higher than the average for the Urban Districts. For a number of years the Rural birth-rates have been consistently lower ; the higher birth-rates which were almost always recorded in Urban areas were explained by the migration of the younger country workers to the towns. Whether the disappearance of this gap reflects a slowing down of migration to the towns and a beginning of a return to the land remains to be seen.

#### SECTION B.

#### **General Provision of Health Services for the Area.**

##### STAFF.

7. A complete list of the Staff was given in my report for 1930. In 1933 the following changes took place, viz. :—

##### *(a) Medical.*

8. Dr. A. B. Follows succeeded Dr. C. F. Brockington, resigned.

9. Dr. Mary Williams retired on the 30th September 1933 and her place was taken by Dr. Vera Pugh (part time) and Dr. M. J. Quirke (part time).

##### *(b) Health Visitors.*

10. Miss M. R. Footman resigned on the 31st December 1933. She has been succeeded by Miss I. M. Robson.

##### *(c) Clerical.*

11. The Clerical Staff has been increased by one. This was necessitated by the decision to centralize the School Medical Inspection Schedules at the County Offices.

#### **Laboratory Services.**

12. An additional Assistant was appointed to the County Laboratory but otherwise the facilities are unchanged. A separate report is published by Mr. C. C. Duncan the County Analyst and Bacteriologist.

13. The increasing use which is being made of bacteriological and biological tests, particularly in connection with the milk supply, has added to the work of this department. The question of sufficiency of existing accommodation is receiving consideration.

### **Ambulance Facilities.**

14. No ambulances are provided by the County Council.

15. The ambulance services maintained by the Red Cross and Local Authorities are sufficient to meet the needs of the County.

16. An ambulance is now provided in connection with the Tenbury Cottage Hospital scheme for that area.

### **Nursing in the Home.**

17. The main provision is through the County Nursing Association, with over seventy affiliated District Nursing Associations details of which were given in my last report.

18. Financial assistance is provided by direct grant to these Associations (*a*) on account of services performed by their Nurses as part time Health Visitors, (*b*) in aid of the provision of an adequate Midwifery Service, and (*c*) on account of nursing the aged and sick in their homes.

19. A Joint Committee representing the County Health and Public Assistance Services reviews the activities of each Nursing Association yearly and makes recommendations as to future grants payable to the Associations.

20. Two new Associations have been formed one at Wythall in the Bromsgrove Rural District and the other covers several parishes near Droitwich.

21. The Associations which ceased to function at Clifton-on-Teme and Hanley Castle have not recommenced.

22. During the year difficulty has been experienced in obtaining the services of a midwife at Spetchley.

23. Several minor alterations in the areas covered by District Nursing Associations have been introduced enabling several small parishes previously unprovided for to be included in the area of an existing Association.



24. The Worcestershire County Nursing Association has been in touch with the Gloucestershire Association as to the borderline Associations working in both Counties. The question of adjustments will be considered when staff vacancies exist or alterations are contemplated.

25. Reference to the County Nursing Association work would not be complete without mention of Miss E. M. Crothers. I share, with many others, regret at her departure from Worcestershire in 1934 to take up an appointment elsewhere. The County will miss the services of a most efficient and hardworking officer.

26. Miss Dickinson has been appointed as the new County Superintendent.

27. The arrangements for nursing of Ophthalmia Neonatorum and Tuberculosis cases in the homes when found advisable has been continued.

### **Clinics and Treatment Centres.**

28. References to Clinics and Treatment Centres are made under their appropriate headings.

29. All the Clinic facilities for School children are also available for children under School age.

### **Hospitals—Public and Voluntary.**

30. In my Annual Report for the year 1930 a complete list of all Hospitals, public and voluntary, used by the inhabitants of the area was given in paragraph 41, page 12.

31. The Mary Stevens Maternity Home at Stourbridge, maintained by the County Council has now to be added to this list.

32. The survey of Isolation Hospital accommodation, required under Section 63 of the Local Government Act, 1929 is being dealt with. The preparation of a Scheme presents difficulties as several of the larger Isolation Hospitals were established under the Isolation Hospital Acts and any revision of the districts covered by these Hospitals requires the consent of the constituent authorities.

33. The very considerable amount of attention given to this question by the Public Health Committee demonstrates the difficulty of adopting the most efficient County Scheme when persuasion rather than legal enactment is the *modus operandi*.

34. The Alcester and Shipston-on-Stour Isolation Hospitals, as a result of revision of County Boundaries, are no longer used by Worcestershire inhabitants.

35. The Voluntary Hospitals, in and adjoining the County of Worcester, which are used by the inhabitants of the County are detailed in paragraph 41 (3) of my report for 1930. There has been very considerable activity in the County Voluntary Hospitals since that report was written.

36. The Worcester Royal Infirmary has added additional and improved accommodation for both patients and nurses ; a new maternity unit has recently been provided.

37. The Corbett Hospital, Stourbridge has opened a new extension including accommodation for children and nursing staff.

38. Bromsgrove Cottage Hospital has provided additional accommodation in the form of a Children's Ward and some small wards for private and isolation cases.

39. Evesham Cottage Hospital completed a large extension a few years ago.

40. At Tenbury and Redditch, Extension Schemes are under consideration.

41. These activities are in no way intended to provide an inclusive list of improvements but are cited as illustrative of the fact that the introduction of the Local Government Act has coincided with a particularly active demand for additional Hospital accommodation which is being provided by the Voluntary Hospitals in the County.

42. These circumstances are of particular importance as in the main portion of the County the policy of arranging for the treatment of the acute sick through the Voluntary Hospitals is generally adopted, the only exception to this being in the North of the County where cases are still sent to Hallam Hospital and Wordsley.

43. The future of Voluntary Hospitals is bound up with the formation and growth of Contributory Schemes.



44. The County Council has endeavoured to work with the Voluntary Hospitals with regard to the question of contributors, for example, all persons receiving a form of treatment provided by the County would be required to repay a certain proportion of the cost, but by arrangement certain sums are now payable by the Contributory Schemes to the County Council in order that the *contributor* may receive free treatment.

45. The relationship between the County Council and the Voluntary Hospitals is most satisfactory. There is small risk of overlapping as long as the present give and take spirit is exercised. A few years ago fears were generally felt for the future of the Voluntary Hospitals ; to-day I think most persons would say their future is assured if co-operation continues to be exercised between the Local Authority and the Voluntary Hospital and equally important between the Voluntary Hospitals themselves.

### **Institutional Medical Services.**

46. The chief improvement of 1933 was the completion of the Evesham Infirmary Extensions. No effort was made to provide any operating theatre or special facilities for the exceptional case which could be better treated in the Voluntary Hospital but good ward accommodation for the more chronic sick with satisfactory sanitary annexes has been provided and the result is, in my opinion, very satisfactory.

47. Improved accommodation for the Nursing Staff at Evesham has been provided.

48. Improvements in the form of adequate washing and sanitary accommodation were carried out at the Norton Cottage Homes, Stourbridge, and Pershore Cottage Homes.

49. Mr. S. C. Meredith, the Public Assistance Officer, informs me that the Casual Wards at Bromsgrove, Evesham and Kidderminster were enlarged in 1933.

### **Poor Law Medical Out-Relief.**

50. The general policy remains unchanged. There appears to be no indication that the Local Authority, the doctor, or the patient wishes for any revision of the existing arrangements. At present only minor modifications of districts covered or the amalgamation of smaller districts is being arranged.

### **Institutional Care of Mental Defectives.**

51. The Special Committee which is considering this matter has met and conferred with other Local Authorities. No decision has been arrived at so far but there is quite a possibility that developments may follow this joint meeting.

52. The County Council continues to send suitable cases to Out-County Institutions but there is difficulty in finding accommodation particularly for the troublesome type of case.

53. The Wordsley Institution provides accommodation for a number of Worcestershire defectives but it is probable that this accommodation will not continue to be available when existing agreements lapse.

### **Midwives Acts 1902—1926.**

54. There has been no change in the administration of the Midwives Acts, and the Assistant County Medical Officers continue to act as Inspectors of Midwives for their respective medical divisions.

55. The number of Midwives who practised in the County in 1933 was 289. Of this number 14 are untrained. The untrained Midwives are elderly women, and were admitted to the Roll when the Act of 1902 came into force; they are a decreasing number and they receive special attention from the Medical Inspectors.

56. Generally speaking their work is satisfactory.

57. In regard to the trained Midwives, little fault was found last year and no case was reported to the Central Midwives Board, although it was necessary to reprimand three Midwives who were concerned in one case of Ophthalmia Neonatorum, and where there was failure to send for medical aid.

58. Subsidies were paid to four Midwives at the rate of £10 each. Compensation amounting to £10 19s. 0d. was paid to Midwives who had been suspended to prevent the spread of infection. In 18 cases grants amounting to £7 2s. 6d. were paid to Midwives for loss of fees as a result of their patients being removed to Maternity Hospitals, and in two cases allowances of £1 5s. 0d. each were made to Midwives where, by reason of poverty, they were unable to recover any part of their fee from the patients.

59. Sixty-eight per cent. of the 4,295 notified births were attended by Midwives.



60. The recovery from patients of a proportion of fees paid to Doctors under the Midwives Acts has continued to give considerable trouble, and much time has been taken by various departments in collecting the small amounts due. Not infrequently by the time it has been decided to take the case to the County Court the patient has disappeared or the family circumstances have altered completely.

61. There is bound to be a certain amount of delay between the attendance of the Doctor and the claim by the County Council for repayment of the fee.

62. As far as their other duties permit the Relieving Officers report on and collect from the cases referred to them by my Office. The position in 1934 has been somewhat improved; the scale has been amended in favour of the patient, and efforts have been made to speed up the process in order that cases who can, but will not pay, are brought to the County Court within a reasonable period.

63. The following Table in connection with fees paid to Doctors in respect of Midwifery may be of interest :—

Year.	Registered Births.	Medical Aid Records.	Number of Claims.	Fees paid.	Amount recovered.
1927	5090	966	516	£767	£112
1928	5108	986	602	£1043	£141
1929	4953	1088	725	£1282	£211
1930	4964	1082	697	£1260	£210
1931	5033	1110	828	£1341	£223
1932	4772	1121	813	£1250	£298
1933	4678	1224	880	£1375	£382

### **Maternity Hospitals.**

*The Lucy Baldwin Maternity Hospital, Stourport.*

64. This Hospital was built by Sir Julien Cahn as a gift to Mrs. Stanley Baldwin, of Astley Hall, Stourport, who presented it to the County Council.

65. The number of patients beds is 14, divided as under :—

One 8 bed Ward.

One 4 bed Ward.

Two 1 bed Private Wards.

There are in addition Two Isolation Beds.

66. The following are statistics relating to the work of the Hospital in 1933, namely :—

Number of cases admitted during the Year	—	204
Average duration of stay	— — —	19½ days.
Number of cases delivered by the Nursing Staff		180
Number of cases delivered by Doctors	—	24
Number of cases in which the Nurses had to send for the Doctor	— — —	62
Number of cases of Puerperal Fever	— —	Nil.
„ „ „ „ Puerperal Pyrexia	—	18
„ „ „ „ Ophthalmia Neonatorum—		1
„ „ „ „ Maternal Deaths	— —	Nil.
„ „ „ „ Stillborn Babies	— —	15
Number of Babies who died within ten days of birth	— — — —	3

67. The three babies who died within ten days of birth were all born prematurely.

68. It would not have been surprising had the number of admissions to this Hospital been affected by the opening of The Mary Stevens Maternity Home at Stourbridge, as many of the cases previously admitted to the Stourport Institution had come from the North of the County, but it will be seen from the number of cases admitted that the pressure on the accommodation in 1933 has been greater than in 1932, and at times the tax on accommodation has been such as to cause some concern. If the demand on this and The Mary Stevens Maternity Home, at Stourbridge continues to increase, it will probably be necessary to exercise selection on clinical grounds of cases for admission.

69. Both these Hospitals are intended to be a definite contribution towards the reduction of maternal mortality: complicated cases therefore must have preference.

70. During the year, shrubs have been planted on the West side of the Hospital; this has added to the beauty of the grounds and will ensure greater privacy for the patients.

71. The help of the Stourport Urban District Council was necessary to effect this, and representatives of that Council were most helpful in bringing about the improvement.



72. The Medical Staff consists of Dr. E. Stanley Robinson, Dr. R. S. MacArthur and Dr. C. Mackie. The Consultants are Professor Beckwith Whitehouse and Mr. A. Danby.

73. I am grateful to these Gentlemen, also the Matron, (Miss Sayers), the Sister, (Miss Shuker) and the Staff for their work in the Hospital, and for the helpful way they have faced the administrative difficulties which cannot be obviated in a small Maternity Hospital. I refer particularly to the periods of relative slackness and intense activity ; the latter not infrequently upsets the off duty time table. Without a willing Staff endless trouble would result.

*The Mary Stevens Maternity Home, Stourbridge.*

74. This Home was built, equipped and presented to the Borough of Stourbridge, by Mr. Ernest Stevens, of Prescott House, Stourbridge, but the County Council are to be tenants so long as the Home is used for Maternity and Child Welfare purposes.

75. There are two six-bed Wards, one two-bed Ward, two single Wards, and an Isolation Block, a total of 18 beds.

76. The following are the Statistics relating to the working of this Home during 1933, namely :—

Number of cases admitted	—	—	—	281
Average duration of stay	—	—	—	14·9 days.
Number of cases delivered by Nursing Staff	—			188
Number of cases delivered by Doctors	—			85
Number of cases not delivered	—	—		8
Number of cases in which medical aid was sent for	—	—	—	64
Number of cases of Puerperal Fever	—	—		Nil.
„ „ „ „ Puerperal Pyrexia	—			4
„ „ „ „ Ophthalmia Neonatorum				6
„ „ Maternal Deaths	—	—		1
„ „ Stillbirths	—	—	—	13
„ „ Deaths of Infants within 10 days of birth	—	—	—	5

77. The Home has been full throughout the Year and at times it has been difficult to find room for all the cases requiring admission.

78. The Medical Officer is Dr. G. Meldon to whose valuable services I paid a tribute in my last Annual Report. I am grateful to him and Miss Garrett, (Matron), the Sister, (Miss Winters), and the Staff for their good work at this Home. The same helpful co-operation is displayed and the remarks I made in reference to the Lucy Baldwin Maternity Hospital are equally applicable in this case.

*Other Institutional Treatment.*

79. Thirteen beds are provided at Public Assistance Institutions and 63 Maternity cases were admitted there in 1933.

80. Eleven cases of complicated pregnancy were sent to Special Hospitals at a cost of £104 17s. 0d.

81. The assistance of Consultants in 12 cases was necessary, and in addition 9 Consultant Ante-natal sessions were held at the Mary Stevens and Lucy Baldwin Maternity Hospitals when 47 patients were seen.

**Maternal Death Rate.**

82. The maternal mortality rate for 1933, was 4.28 per 1,000 of the births registered. This rate represents 10 deaths from Puerperal Sepsis and 10 deaths from other accidents and diseases of pregnancy.

83. The deaths and death rates for the past 10 years have been as under :—

Year.	Sepsis.	Other Causes.	Total.	Rate per 1,000 of Births.
1933	10	10	20	4.3
1932	10	12	22	4.6
1931	6	11	17	3.3
1930	17	11	28	5.6
1929	13	12	25	5.0
1928	5	15	20	3.9
1927	13	19	32	6.2
1926	11	15	26	4.9
1925	6	15	21	3.8
1924	7	10	17	3.0
1923	4	9	13	2.3
Average	9	13	22	4.2



84. An Inquiry was made into each maternal death and a report sent to the Ministry of Health.

85. The usual procedure in each case of Puerperal Fever has been followed, namely :—

- (1) Offering to the notifying Practitioner, Institutional or other facilities for treatment.
- (2) Temporary suspension of the Midwife for purposes of disinfection.
- (3) Obtaining a report from the Assistant County Medical Officers as to the need for further action.

#### **Dental Treatment for Expectant Mothers.**

86. Assistance was given in 30 cases during 1933. Treatment is arranged for with private Dental Practitioners and a proportion of the cost is paid by the patients.

#### **Ante Natal Work.**

87. The majority of cases still depend upon the Midwife and the Medical Attendant for their ante natal supervision. The figures relating to the County Council and Voluntary Ante Natal Clinics are set out below. The figures for the Evesham Ante Natal Clinic are also given, but this Clinic is run entirely by the District Nursing Association.

Ante Natal Clinic.				Average attendance.	First visits.
Bromsgrove	—	—	—	3	13
Blackheath	—	—	—	3	40
Evesham —	—	—	—	11	130
Halesowen	—	—	—	14	105
Lye —	—	—	—	10	56
Lucy Baldwin Maternity Hospital				11	167
Mary Stevens Maternity Home	—			16	367
Newtown, Malvern		—	—	10	42
Stourbridge	—	—	—	8	85
Worcester	—	—	—	5	37

88. A Total of 1,042 Expectant Mothers attended Ante Natal Clinics during 1933 ; a further 85 attended the County Council Infant Welfare Centres and 48 attended the Voluntary Infant Welfare Centres.

89. Thus of the total number of Births in the County Council Maternity and Child Welfare area, 35% attended at the Ante natal Clinics and Infant Welfare Centres.

90. The percentage 35% is still small, but a comparison with previous years provides definite evidence of progress. The ideal of a general practitioner service for all ante natal work will probably materialize in the distant future. In the meantime the present County arrangements are proving useful. A number of abnormal cases are found and treated in appropriate Hospitals and it seems certain that further sessions for ante natal work will be required before long.

91. The ante natal clinic at Stourport is run in connection with the Lucy Baldwin Maternity Hospital and Drs. Stanley Robinson and MacArthur are in charge.

92. The Malvern Clinic at Newtown is provided by the Malvern Voluntary Association ; Dr. Mitchell being in charge.

93. The Evesham Clinic is run by the Evesham District Nursing Association and any abnormal cases are referred to their own Doctors.

94. Dr. Eileen Bulmer and Dr. Vera Pugh do the remaining ante natal clinics. The former attends the Mary Stevens Maternity Home and the Voluntary Ante Natal Clinic provided by the Stourbridge Voluntary Association.

95. The two Maternity units at Stourport and Stourbridge and the arrangements for referring particularly difficult ante natal cases to a Consultant Obstetrician, are run in close association with the routine ante natal work, and should provide a most valuable provision in this County for combating the problem of maternal mortality.

96. The ante natal work by District Nurses and Midwives is becoming more useful although the older Midwife was rather appalled by the size and complication of the form required to be kept by the Central Midwives Board when first introduced. The Midwife is instructed to complete the form as far as she is able. Midwives have had the opportunity of attending post certificate classes in Birmingham, and Lectures in Worcester.



97. It is my intention to try to commence post certificate instruction for County midwives in the Lucy Baldwin and the Mary Stevens Maternity Homes at some later date.

98. The supervision exercised at ante natal centres must be closely associated with arrangements made for the confinement, whether this event is to take place in an Institution or in the patient's own home. As far as the two maternity units are concerned our arrangements which were carefully thought out are working admirably. At Stourbridge it was feared the complications of so many different doctors attending the Home and the ante natal supervision being provided near the patient's residence by another doctor, would not prove a workable arrangement. I am very satisfied with the existing arrangements and it is pleasing to report that after the first twelve months experience, the local branch of the British Medical Association informed me that arrangements were satisfactory to them and no modifications were suggested.

99. Midwives are informed of the first attendance at the Centres of any booked case — this is an essential provision. Midwives are encouraged to bring up their cases, and compensation is paid for the loss of booked cases transferred to Hospital. The advice of a midwife to a booked case to attend the local ante natal clinic has been advanced as a reason why she (the midwife) should not provide adequate ante natal supervision as required by the Rules. One has much sympathy with the midwife—her big responsibilities, her many records, the inadequate fees and no security as to bad debts, but she must satisfy herself that the advice given is followed, and for this reason it is imperative that midwives be informed of the first attendances or any complications discovered at ante natal clinics relating to their booked cases.

#### **Health Visitors.**

Infant mortality rate per 1,000 births 1933	=	64
Average annual mortality rate 1923-32	=	63

100. The reports of the Health Visitors record that 6043 visits were paid to the homes of expectant mothers.

101. 4,678 births were registered in the Administrative County in 1933, and of these 287 died before attaining one year of age.

102. The hot summer of 1933 makes the figure of deaths (under 2 years of age) from diarrhoea of particular interest. The total for the County is 34, the deaths in Oldbury numbered 9, in Kidderminster 6, and in the remainder of the County 19; the former two areas are separate Maternity and Child Welfare Authorities.

Whilst the figures for Oldbury are better than 1932, the Kidderminster rate compares unfavourably with previous years. I have no definite information but it has been suggested that this figure may be associated with the outbreak of waterborne diarrhoea and vomiting which occurred in this town. The largest cause of death is the group "congenital debility and malformation including premature births" which account for no less than 151 deaths; considerably more than half the total.

103. Improved health of the Mother during pregnancy provides the only real hope of any reduction of deaths in this group.

104. I mentioned in 1932 that the Infant mortality rate in Evesham Borough was 20, the figure for 1933 is 23, again the best for County Urban Districts. Whilst small figures are apt to mislead I think the Voluntary Committee and their Health Visitor must be more than pleased with this excellent record, particularly as I know the very great amount of work and interest displayed by this Committee, and of the efforts they have made to see that the altered administration which involved change of staff should be introduced with as little difficulty as possible.

105. The Infant Mortality Rate for England and Wales 1933 was 64, precisely the same figure as Worcestershire. This comparison makes it clear we cannot be satisfied. The County rate has always been more favourable than the Country as a whole. Whilst small areas give misleading figures, for example Kidderminster Rural, 109, I do not think an average of 70 for the Urban Districts, which is the figure for the last two years, can be accepted as good for an area comprising residential, agricultural and industrial types.

106. The deaths during the first few weeks after birth from prematurity or congenital causes, have in the present state of our knowledge to be accepted as an irreducible minimum; better health and care of the Mother during pregnancy provides the only real hope for a reduction of this portion of the rate. The deaths from other causes are largely controlled by Mothercraft, education of the Mother in the Clinic or the Home, and it is in this direction improvement ought to be obtained.

107. The average figure for Worcestershire should be nearer 50 than 60 even if the present so called irreducible minimum be accepted.



108. The following Table gives details of attendances at the Infant Welfare Centres during 1933 :—

**County Council and Voluntary Infant Welfare Centres.**

	Average attendances.			
Blackheath	—	—	—	71
Bromsgrove	—	—	—	58
Cradley	—	—	—	47
Catshill	—	—	—	26
Halesowen	—	—	—	83
Lye	—	—	—	57
Rubery	—	—	—	39
Redditch	—	—	—	46
Worcester	—	—	—	6
*Alvechurch	—	—	—	30
†Beoley	—	—	—	31
*Broadway	—	—	—	15
Belbroughton	—	—	—	10
Evesham	—	—	—	39
Fairfield	—	—	—	11
*Littleton	—	—	—	10
Malvern Link	—	—	—	49
Poolbrook, Malvern	—	—	—	25
Newtown, Malvern	—	—	—	43
*Ombersley	—	—	—	12
*Stourport	—	—	—	28
‡Stourbridge	—	—	—	57
*Tardebigge	—	—	—	12
†Upton-on-Severn	—	—	—	18
*Welland	—	—	—	15
*Wribbenhall	—	—	—	22

\* Opened Fortnightly.

† „ Monthly.

‡ „ Twice weekly.

**Unmarried Mothers.**

109. The Council continued their Grant of £420 per annum to the Greenhill Hostel at Kidderminster, where 25 cases were admitted in 1933.

110. Considerable structural alterations were made at this Institution in 1933 which have greatly increased its general efficiency.

111. Unmarried Mothers are only admitted to the two County Maternity Institutions when clinical complications exist ; cases expected to be normal are referred to the Public Assistance Institutions or the Greenhill Hostel.

112. It has been previously mentioned that the total number of births in the County has fallen markedly, but there does not appear to be the same tendency for the illegitimate births to diminish, as there is an increase proportionately and actually in the number of illegitimate births.

#### *Nursing Homes Registration Act 1927.*

113. The County Council is the Authority under the Act for the whole Administrative County.

114. There are 29 Nursing Homes on the Register. Each Home is inspected half yearly by one of the Assistant County Medical Officers, and a report submitted to me. The following action was taken in 1933, namely—

No. of applications for Registration	—	—	1
No. of Homes registered	—	—	1
No. of orders refusing or cancelling registration—			—
No. of appeals against such orders	—	—	—
No. of applications for exemption from registration	—	—	—
No. of applications for re-registration when removed to new premises	—	—	1

#### **Educational Work.**

115. The basic work consists of talks by the Health Visitor at Welfare Centres and the individual instruction by visits to the Home.

116. *Women's Institutes.* A limited number of Lectures on health subjects are given periodically by the County Health Visitors. The number of such lectures has been increased from 12 to 18 annually.



117. *Mothercraft Lectures.* These courses have been continued in certain schools in the County, a Health Visitor, with the approval of the Education Department, giving the instruction to the Senior girls in the school.

*Mothercraft competitions.*

118. *Infant Welfare Centres.* Certain of the Infant Welfare Centres entered the National Baby Week and other similar Competitions, and the following honours were gained, namely :—

- |                   |   |  |
|-------------------|---|--|
| Malvern Centres   | — | 3 first class certificates.                    |
|                   |   | 3 honours certificates with distinction.       |
|                   |   | Bronze medal for gaining 4th place in England. |
| Blackheath Centre | — | 6 first class Certificates.                    |
|                   |   | 2 second class Certificates.                   |
| Halesowen         | — | 5 first class certificates.                    |
|                   |   | 1 Honours certificate.                         |

119. *County Library.* A section for Nurses has been started. Books dealing with professional matters can be obtained by District Nurses and Health Visitors.

*Post Certificate Lectures for Midwives.*

120. The following Post Certificate Lectures were given at Worcester during 1933, namely—

Miss Thomas, Sister Tutor of the Loveday Street Maternity Hospital Birmingham gave a course of three lectures which proved most successful. The attendances were particularly good.

121. *Post Certificate Instruction.* Some of the Midwives in the North of the County have by arrangement been able to attend the Courses of post certificate Instruction organised for Birmingham Midwives.

### Ophthalmia Neonatorum.

122. The following statement shows the number of cases, and it is satisfactory to find that in all living cases the vision was unimpaired.

Cases.				Vision unimpaired.	Vision impaired.	Total Blindness.	Deaths.
			Treated.				
Notified.			At Home.	In Hospital.			
County M. & C.W. area	—	—	14	8	21	—	1
Kidderminster Boro'	—	—	1	3	4	—	—
Oldbury Urban District	—	—	10	1	10	—	1
TOTALS	—	—	25	12	35	—	2

### Venereal Diseases.

123. The usual tabular statements are submitted. One case was admitted to Cleveland House, Wolverhampton, during 1933.



# VENEREAL DISEASES. SUMMARY, 1933.

Treatment Centre.	"NEW" OUT-PATIENTS.					"NEW" IN-PATIENTS.					IN-PATIENTS	Total Attendances of all Patients.					SALVARSAN SUBSTITUTES.		No. ceasing attendance before completing treatment	No. of specimens examined.
	Syph- ilis.	Gonorr- hoea.	Soft Chancre	Not V.D.	Total	Syph- ilis.	Gonorr- hoea.	Soft Chancre	Not V.D.	Total days.		Syph- ilis.	Gonorr- hoea.	Soft Chancre	Not V.D.	Total attend- ances.	No. Treat- ed.	No. of doses		
Worcester																				
Royal Infirmary Kidderminster	17	21	-	23	61	3	3	-	-	321	562	890	-	142	1594	-	410	18	249	
Hospital - Birmingham	9	16	-	50	75	2	2	-	-	142	330	679	-	59	1088	50	236	9	219	
General Hospital Guest Hospital,	33	48	-	52	133	-	1	-	1	110	1278	1905	-	129	3312	161	927	34	1371	
Dudley	12	19	-	16	47	-	-	-	-	-	413	1584	-	71	2068	37	209	8	227	
Corbett Hospital, Stourbridge	11	23	-	12	46	-	3	-	-	56	401	1786	-	23	2210	41	163	19	235	
Totals	82	127	-	153	362	5	9	-	1	629	2984	6844	-	424	10272	-	1945	88	2301	
Totals for prev- ious year (1932).	79	143	-	151	373	3	12	-	1	670	3153	7598	1	332	11084	-	1961	149	2253	

# VENEREAL DISEASES

This Table compares the number of County cases treated at Clinics in 1933, with those in the nine preceding years, viz.:—

Year	Worcester			Kidderminster			Birmingham			Dudley			Stourbridge			Grand Total
	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total	Syphilis	Gonorrhoea	Total	
1924	—	20	42	39	11	50	19	21	40	7	10	17	8	14	22	171
1925	—	17	34	29	13	42	9	29	38	17	11	28	3	13	16	158
1926	—	9	36	28	15	43	12	19	31	4	19	23	7	23	30	163
1927	—	18	44	15	23	38	12	27	39	4	16	20	8	33	41	182
1928	—	16	41	17	19	36	17	18	35	3	16	19	10	17	27	158
1929	—	24	66	33	25	58	18	51	69	1	4	5	4	15	19	217
1930	—	20	60	35	27	62	23	43	66	15	14	29	17	36	53	270
1931	—	21	62	21	24	45	30	42	72	9	12	21	10	29	39	239
1932	—	20	55	21	23	44	23	55	78	4	15	19	11	15	26	222
1933	—	17	38	9	16	25	33	48	81	12	19	31	11	23	34	209



**Children Act, 1908 and Children and Young Persons Act, 1932.***Infant Life Protection.*

124. Miss J. C. Butler is the official Infant Life Protection Visitor and she visits all fresh cases brought to my notice.

125. The changes involved by the Children and Young Persons Act, 1932 duly came into operation on the 1st January 1933 and have been administered without difficulty.

126. Twenty-nine cases were registered during the year, making a total of 182 cases dealt with since the 1st April 1930.

127. The number of children on the register at the end of the year was 59 and the number of homes in the County registered as suitable for the reception of either one or two infants is 145.

128. During the year a request was received from a registered foster mother for approval of her home as a "Nursery" for a number of infants, but after consideration of all the circumstances it was decided to follow the usual practice and limit the number of children to two. In only one case has an exception to this rule been made, namely, where a foster mother registered in an adjoining county for the reception of three children removed to Worcestershire with the three children.

129. The provisions of the Children Acts now apply to Preparatory Schools having boarders under the age of nine years. The County Council have, however, exercised their powers under the Acts to grant certificates of exemption to four Preparatory Schools in the County; a full report on each school was obtained and the certificate is granted subject to revision in case of altered circumstances, *i.e.* change of ownership.

130. In two cases arrangements were made for the removal of children placed in homes which were definitely unsuitable, while in four cases children have been allowed to remain in homes, which, although not quite up to the standard now maintained in the County, offered decidedly better accommodation than the alternatives available in the respective cases; temporary approval has been given and the cases are kept under close review.

131. Difficulty continues to be experienced in a number of cases with regard to regular payment for the child's maintenance, but while every possible assistance is given to foster-mothers, there is no action in this connection which can be taken under the Acts. The co-operation of the Worcestershire Diocesan Association for Moral Welfare Work has been of great assistance.

### Orthopaedic Treatment of Cripples.

132. The work has been continued substantially on the lines of previous years.

133. Cases are discovered by Health Visitors, as a result of home visits, by Doctors at Infant Welfare Centres, at School Medical Inspection and by tuberculosis notification : other cases are referred to me by private Doctors.

134. Where the parents are unable to pay a Specialist's fee, the case is referred to one of the Clinics : in the North of the County at Stourbridge, Redditch and at Broad Street, Birmingham and in the South of the County at the Worcester Royal Infirmary.

#### *In-Patient Treatment.*

135. The following Table gives the number of cases treated as in-patients in Hospitals :—

		Non-Pulmonary Tubercular Cripples.		Crippled School Children.	Infants.	Total.
Birmingham Royal Cripples Hospital	—	—	45	34	8	87
Shropshire Orthopaedic Hospital	—	—	3	1	—	4
Warwickshire Orthopaedic Hospital	—	—	2	—	1	3
Worcester Royal Infirmary—			6	8	7	21
Birmingham Childrens Hospital	—	—	2	—	—	2
Worcester, Newtown Hospital			10	—	—	10
Kensington	—	—	—	1	—	1
			68	44	16	128

The 68 cases of tuberculosis were :—

Spine cases	— — —	32
Other Bone and Joint lesions		36

#### *Out-Patient Treatment.*

136. The attendances at the After-Care Clinics are set out in the following Table :—



1933.

Centre.	Number of School Children attending.	Total attendances by School children.	Number of Infants attending.	Total attendances by Infants.	T.B. Cases attending.	Total attendances by T.B. cases.
Stourbridge -	242	780	66	288	28	91
Redditch -	78	301	38	161	16	58
Worcester -	81	231	29	75	21	48
Broad St., Birmingham -	19	298	3	81	11	88

*Massage and Remedial Exercises Clinics, Stourbridge.*

137. There were 3,072 attendances at this Clinic during the year. Of this number 2,564 were made by School Children, 426 were by Infants and 82 by Tuberculosis cases. The Clinic is open on five days each week and is staffed by trained nurses from the Birmingham Royal Cripples Hospital. Close co-operation is maintained with the After-Care Clinic as the Nurse attends at the Surgeon's Sessions when he can give instructions as to treatment of any case.

*Redditch.*

138. The arrangements with the Smallwood Hospital continue to work satisfactorily.

*Orthopaedic Sister.*

139. Miss O. M. Woods, who is employed by the Worcester Association for Mental and Physical Welfare, is doing most excellent work in South Worcestershire ; she is also employed in the City of Worcester.

140. The Committee of this Voluntary organization knowing the importance of this work and recognising the need for further preventive effort have appointed an assistant part time Orthopaedic Nurse who will assist Miss Woods in connection with some of the County work.

141. Posture classes were held at twelve Centres during the year and in addition 405 visits were made to patients' homes.

## SECTION C.

**Sanitary Circumstances of the Area.**

## WATER SUPPLIES.

*Bewdley Borough.*

142. Owing to the faulty condition of Long Bank Reservoir a new reinforced concrete water tower, capacity 60,000 gallons, has been erected to replace it on the highest point of Long Bank.

143. It is proposed to enlarge the rising main, from the water-works to Mount Pleasant Reservoir, from 6" to 10" and to build a million gallon reservoir to serve the increasing areas of Bewdley and Stourport.



*Evesham Borough.*

144. Dr. Harthan, the Medical Officer of Health, states that the yield of the springs did not actually fall below consumption until mid December 1933 when it was considered advisable to turn off the supplies at night. The wisdom of this restriction was demonstrated by the continued drought of 1934. The supply is usually abundant with a large surplus but the exceptional drought has taxed the local resources and called for local co-operation with the Rural District supplies. At the time of writing the position though not safe has been met with energy and the Borough has, I understand, a call on further supplies should the need arise.

*Halesowen Urban District.*

*District of Illey.*

145. Since my last report financial assistance has been given in respect of Illey, a very sparsely populated portion of the Halesowen Urban area. A water supply for this rural portion of the area was urgently needed and the South Staffordshire Waterworks Company were prepared to extend their mains subject to the usual guarantee. The estimated cost of the extension was £1,000 and it was clear that the water rates collected would not meet the charges to the water company for many years.

146. The County Council agreed to the principle of assisting the Halesowen Urban District Council in their guarantee to the Waterworks Company and to pay for a period of ten years one half of the annual charge of £100 after deduction therefrom of the amount of water rates collected.

147. The application was an unusual one and in granting assistance to the Urban District Council note was taken of the fact that differential rating was provided for in reference to Illey when the Halesowen Urban District was first constituted and that this differential rating would exist during the time the guarantee to the Water Company had to be met.

*Kidderminster Borough.*

148. There was no shortage in the Borough supply but reference is made elsewhere to the outbreak of water-borne diarrhoea and vomiting which occurred in the Autumn of 1933.

*Malvern Urban.*

149. The addition of certain new areas to Malvern has made it necessary to consider additional water and drainage facilities.

150. A new 4" water main is being laid to Guarlford.

*Redditch Urban.*

151. Dr. Collier, the Medical Officer of Health, states that the recent extension of boundaries has brought into the area a number of isolated communities and dwelling houses in which the water supply is far from satisfactory. All those parts of the area which have a piped supply have presented no difficulty but at Ham Green, and one or two other places, there has been an acute shortage of water during the latter part of 1933 and during the present year.

*Rural Districts.*

152. Information has been obtained from the Rural District Councils in the County giving results of the surveys of their respective areas with regard to water supplies and sewerage.

153. General information and details as to shortage were considered by the Committee.

154. A brief summary of the replies is set out below.

*Bromsgrove Rural District.*

155. A comprehensive report has been received. The mains of the East Worcestershire Waterworks Company, the Birmingham Corporation, the South Staffordshire Waterworks Company and the Stourbridge and District Water Board supply the various parishes in the area of the Rural District Council. Generally, the Rural District is in a fortunate position ; the following extracts are of interest :—

*Beoley.* “ The village and parish generally are dependent on wells ; the supply is adequate but liable to local pollution.”

*Clent Parish.* “ The supply at Adams Hill is derived from shallow wells and a few small springs. The wells are mostly in poor condition and the supply is not satisfactory. During the summer, when there is a large influx of visitors, the supply is not sufficient. The area is above the limits of the Stourbridge and District Water Board. A scheme for installing an electrical pumping plant for lifting the water from a normal level to the necessary higher level, to supply Adams Hill by gravitation is under the consideration of the Council.”



*Dodford with Grafton.* “ This is a parish of scattered houses. During the present dry period acute shortage of water for domestic purposes has been experienced at 11 houses. The depth of the wells affected is about 40 feet. A well deepened some years ago to a depth of 90 feet to assure a perennial supply yields only at the present time 6 to 8 gallons per day. A few wells at approximately 40 to 50 feet in depth yield an abundant supply.

The majority of the houses are provided with ample storage facilities for rain water. Water from two small streams is collected and used for other than potable supplies in many cases.”

*Romsley Parish.* “ The supply to the *Hamlet of Dayhouse Bank* is derived from wells, three shallow wells belong to the Parish, following the drought in 1921 they were deepened. The supply at Chapman’s Hill is also derived from wells.”

In both these areas it is stated the supply is unsatisfactory.

*Droitwich Rural District.*

156. St. Martin (County) and a few houses in North Claines and Warndon parishes obtain water from Worcester City.

157. Parts of the parishes of Dodderhill, Hadzor and Upton Warren obtain piped supplies from the East Worcestershire Waterworks Company.

158. The report of the Rural District Council expresses the view that the supplies in every parish are adequate both as regards quantity and quality.

159. I have recently had information that certain houses in Fernhill Heath have experienced difficulty in obtaining water which is obtained from wells which have been deepened and again failed. I have been in touch with the Rural District Council as to this.

*Evesham Rural District.*

160. The reply states “ Generally, the district has an excellent “ supply of water. The Council will be considering at a later “ date the question of improving and extending the supplies in “ certain parishes and also problems connected with sewage “ disposal.”

161. The Evesham Rural District Village Water Scheme (the supplies being obtained from Springs at Stanway, Broadway Hill and Buckland) covers most of the parishes.

162. The mains in certain parts of Broadway Village require renewal.

163. Church Lench, Rous Lench, Bickmarsh, Inkberrow and Abbots Morton depend on well supplies ; there is an insufficiency at Bickmarsh and the Council are considering extending their mains to this parish.

164. Beckford, Conderton, Overbury and Kemerton are supplied from Springs on Bredon Hill.

*Kidderminster Rural District.*

165. The Birmingham Aqueduct passes through the Rural District.

166. The Cookley Borehole supplies most of the parish of Wolverley.

167. Upper Arley and Kidderminster Foreign obtain supplies from the Birmingham Aqueduct. A scheme has been sanctioned for supplying Broome from the mains of the Stourbridge and District Water Board ; the supply for Churchill and Blakedown is also obtained from this Company.

168. The water supply of the rest of the district is from wells ; the supply to the parish of Rock is said to be doubtful both as regards quality and quantity and the parish of Chaddeley Corbett has a sufficiency of water which in the Village is not of satisfactory quality.

169. Subsequent information supplied relating to Far Forest (Rock Parish) indicates there is no general shortage, but the report states " It is clear that during the latter end of the summer there " was a shortage of water and in many cases the residents were " obliged to carry water from the nearest source that could yield " a supply for drinking purposes. Fortunately this was available " in most cases within 200 yards." The Medical Officer and Sanitary Inspector surveyed the area on March 10th and 16th and then reported no case of any water shortage ; the houses where shortage had occurred had about 10 feet or more of water in their wells which were mostly 25 to 35 feet deep.



170. The water supply to Kingsford (Wolverley Parish) has been considered by the Public Health and Housing Committee on several occasions. Some new wells have been sunk ; some unfit houses without a supply are to be demolished.

*Martley Rural District.*

171. The reply states—" The Sanitary Committee consider that  
 " the existing supplies are in normal circumstances sufficient and  
 " that having regard to the comparative freedom of the District  
 " from diseases which are usually attributable to unwholesome  
 " drinking water the quality of the water may on the whole be  
 " regarded as satisfactory. The Council have formed a Special  
 " Committee to consider the question of water supply at Rushwick,  
 " St. John County, and in other places in the Rural District where  
 " improvements in the present supplies might appear to be desir-  
 " able, with power to obtain expert advice."

172. A few houses in North Hallow are supplied from Worcester City. There is a piped supply to Clifton-on-Teme Village. A few houses are connected with private supplies in Doddenham and Great Witley.

173. The above general statement is the only information as to the water supplies of the individual parishes.

*Pershore Rural District.*

174. Four parishes have been included in a water Scheme—Eckington, Pinvin, Pershore Holy Cross and St. Andrew. Part of Wyre has a piped supply.

*Bishampton.* " In very dry periods the water has to be sparingly used. Some wells go dry. Some inhabitants have to carry water long distances."

*Great Comberton.* The greater part of the parish is supplied from Springs on the north side of Bredon (private undertaking). The supply was not sufficient in 1933 ; there is very limited storage.

*Dormston.* Mostly from open pools and elsewhere wells. Some of the wells go dry in drought. The quality is not considered satisfactory.

*Fladbury.* Some wells get low in drought and the quality is not satisfactory.

*Kington.* Supply not entirely sufficient.

*Naunton Beauchamp.* The supply derived from wells and brook is not satisfactory, either as to sufficiency or quality.

*Peopleton.* The village wells go dry during drought ; the quality is not satisfactory.

*Upton Snodsbury.* There is a shortage of water during drought ; some of the water is brackish and of poor quality.

*Wick.* The supply derived from wells is not sufficient in periods of drought ; the quality of the water in many cases is poor.

175. The difficulties of parishes in the Pershore Rural District are not new—the drought has drawn attention to the problem. The supplies derived from shallow wells cannot be expected to prove satisfactory as regards quality or quantity ; as deep wells not infrequently provide brackish water, the solution can only be found by bringing water from a distance, or by storage of rain water which would not have provided a very hopeful remedy during the recent drought.

*Tenbury Rural District.*

176. The supply is generally from wells and springs. The supply for Tenbury town, from the Clee Hills, is reported to be satisfactory both as regards quality and quantity ; by laying a short length of main it would be possible to obtain a supply (if required) from the Birmingham Aqueduct.

177. There is no shortage of water in any parish and the quality is generally good.

*Upton-on-Severn Rural District.*

178.. Part of the parish of Upton is supplied from a deep Borehole.

179. A few houses in Powick are supplied from the Worcester City main which goes through the village. A few houses also obtain water from Malvern, but the cost is said to be prohibitive.

180. The main supply is derived from shallow wells ; the water is in several parishes said to be hard. The report received from the District Council is not very definite and generally states “ No complaint of shortage ” ; in a few instances it is recorded “ the supply is rather low this summer.” The quality of the water is described as fairly satisfactory.



### **Regional Water Committee.**

181. The Advisory Committee on water is drawing up a programme of appropriate regional divisions for water committees with the object of suggesting means for stimulating the formation of regional water committees on a more generous scale. It is suggested that a suitable region might include the Counties of Staffordshire, Warwickshire and Worcestershire and it is probable that a conference of these authorities will be called in due course.

### **Drainage and Sewerage.**

#### *Bewdley Borough.*

182. No progress has been made with regard to re-sewering the Borough. The sewers discharge into the River Severn.

#### *Bromsgrove Urban.*

183. The re-sewering of parts of this area (particularly Catshill and the Lickey) is still outstanding. A Ministry of Health Inquiry took place in 1934. The decision of the Ministry is not yet known. This part of Worcestershire continues to actively develop. I know of no sanitary improvement in the County which is more urgently required.

#### *Droitwich Borough.*

184. The new disposal works and the re-sewering of parts of the Borough were completed during the year.

#### *Kidderminster Borough and Stourport Urban.*

185. The existing method of disposal in both these areas is open to objection.

186. The possibility of joint action along with the Borough of Bewdley has been explored. The report of the Engineer has received consideration but it seems probable that each authority will proceed independently.

187. The original proposal of the Borough of Kidderminster to continue land treatment of sewage up to three times the dry weather flow was not agreed to.

## Rivers and Streams.

### *River Severn.*

188. A survey of this river was made on the 20th April 1933 by the County Analyst who reported that the river was in a satisfactory condition.

189. A winter survey was made on the 28th February 1934 in which the County Analyst (Mr. C. C. Duncan) states "the river owing to the continued dry period was low but there was plenty of water flowing over the weir at Holt and Worcester. The river did not show any deficiency in the dissolved oxygen content. Having regard to the sewage effluents entering the river at Bewdley, Stourport, Droitwich (via the River Salwarpe), Worcester, Malvern and Upton-on-Severn the condition of the River Severn on the 24th February 1934 was satisfactory."

### *River Stour.*

190. As a result of a survey by the County Analyst during the summer of 1933 it was decided that the Upper Stour be re-surveyed with special attention to certain points where unsatisfactory conditions were observed.

191. Reporting in February 1934 Mr. C. C. Duncan says "the river was on the low side. At two of the points the dissolved atmospheric oxygen figures were low showing a percentage deficiency of 37.8 and 23.9 respectively. At Cradley a culvert was discharging into the River Stour a small volume of liquid. This was purified effluent and much better coloured than that which was discharging during the last survey. The upper Stour appeared to have contained more iron than in several past surveys. This may be due to less dilution as the Stour was on the low side owing to the continued dry period. There was however no evidence of gross contamination with acid waste as the samples of river water were with one exception alkaline or neutral in reaction."

192. During 1934 I made a survey with officers of the Staffordshire County Council; there was evidence of extensive pollution with acid waste; the pollution arising from the Worcestershire side of the river is worse than from the Staffordshire side.

### *Evesham Rural.*

#### *Badsey Brook.*

193. Pollution of this Brook (amounting to a nuisance) arose in connection with a Canning Factory.

194. I visited the factory with the Medical Officer of Health who informs me some additional disposal plant is being installed.

*Droitwich Canal.*

195. A serious nuisance in the vicinity of Salwarpe, arising from the stagnant and polluted water in this Canal was complained of. That the complaint was justified is not questioned.

196. The Canal Company were communicated with but the matter was rather complicated by the absence of flow said to be connected with road and bridge alterations over the Canal. I understand the position is much improved now and no further complaints have been received.

*Closet Accommodation.*

*Halesowen Urban.*

197. In less than ten years the number of privies has been reduced from 1,900 to less than 100.

*Bromsgrove Urban.*

198. This is the only large Urban area with any considerable number of privy middens and pail closets. No change may be expected until sewerage is provided.

### **Schools.**

199. Forty-eight schools were closed during the year to prevent the spread of infection. The comparable figure for 1932 was 37.

200. I have previously commented on the usefulness in certain instances of closure but such cases provide the exception rather than the rule.

201. Closure for Mumps is, in my opinion, useless on account of early infectivity and the very long incubation period.

202. Closure is not infrequently asked for to deal with a school depleted of teachers or scholars when from the point of view of control of the spread of infection no useful purpose is served.

203. In Redditch, the Medical Officer of Health, Dr. H. E. Collier, with the assistance of Dr. A. B. Follows who is on my Staff, commenced immunization of the School population against Diphtheria. Details are given in the School Report for 1933.



## SECTION D.

**Housing.**

204. With the object of securing full co-operation between County Councils and Rural District Councils in regard to rural housing, Rural Districts are required by the Housing Act 1930 to supply, at reasonable intervals, such information as the County Council may require.

205. The County Council is in the main a supervisory housing Authority, but certain executive functions, such as the provision of houses for their own employees, may be undertaken. In this connection the provision of houses has been confined to the better paid classes, such as policemen, teachers, etc., but as regards roadmen, who are more or less comparable with the true agricultural worker, no action has so far been taken.

203. The County Council convened a Conference in April 1931, when information relating to housing in each Rural District was considered. It was clear that some Rural District Councils had no information as to the housing conditions then existing in their districts, and the Public Health and Housing Committee therefore requested each Authority to undertake a survey of houses occupied by the working classes, and, at the same time, to consider whether sufficient staff was available for this important and statutory duty.

207. As a result, two Districts have increased their staff for this work, and in others improved figures are being supplied.

208. It can now be asserted that the problem is at last being defined, as most Districts are reviewing the position after recent inspection of properties. The very different figures now supplied by certain District Councils, and the consideration of the census figures relating to overcrowding, justify the action of the Public Health and Housing Committee in not accepting some of the returns of 1931 as accurate.

209. In the Autumn of 1932, the Public Health and Housing Committee were informed that Local Authorities in the County were experiencing difficulty in getting housing schemes approved by the Minister of Health. The withdrawal of the housing subsidy in December 1932 and the introduction of yet another Housing Bill has naturally changed the outlook for housing in both Urban and Rural areas.

210. The Housing (Rural Authorities) Act 1931, contemplating the erection of 40,000 agricultural cottages, was, on account of the economic position then existing restricted to 2,000 dwellings, and the small number allotted to Worcestershire will not appreciably affect the housing position in this county. Whilst it was difficult, with subsidies, to build houses in which the agricultural workers could afford to live, it seems even more unlikely that, without a subsidy, the activities of Building Societies will result in any appreciable impression being made on the housing problem of lower paid rural workers. Despite the fall both in the rate of interest and in the cost of building, it is only too obvious that it is economically unsound to build houses for rural workers in which they cannot afford to live. No good purpose would be served by providing houses at 8 to 10 shillings per week for workers earning 30/- per week.

211. The only Rural District Council to build houses without subsidy during 1933 was the Evesham Rural District Council where eight were completed in the Parish of Broadway.

212. I understand the rentals of such houses (allowing for the £1 grant from the County Council) is about 8/- per week.

213. The Council has since come forward with a suggestion to reduce rentals for the poorer workers namely a further subsidy (over the Statutory £1 per house) taking the form of equal contributions from the County Council and the Rural District Council. No decision has yet been reached as to this.

214. The policy now advocated by the Government is slum clearance and the demolition of unfit houses. Assistance in the form of a grant based on the number of persons re-housed is continued for work of this character.

215. It appears to be clear that immediate improvement in rural housing will be determined largely by the efficiency or otherwise of the housing inspection of the district. Unfit houses can still be discovered and demolished and new houses provided in substitution, whether it be as an individual house, or by groups, in clearance or improvement schemes. Reconditioning and improvements can be provided by landlords with or without assistance under the Housing (Rural Workers) Acts, but little will be done unless Local Authorities take active steps to exercise their powers. The Housing (Rural Workers) Acts have proved a dead letter in some of the most typically rural districts, yet there are many defective houses in these districts which, with advantage, could be reconditioned.



216. It may be of interest to record that Pershore has been the scene of an Inquiry by an officer of the Ministry of Health in regard to the slum clearance of some 40 houses. The activity in this District under the Housing (Rural Workers) Acts also indicates the intention of the Pershore Rural District Council to improve the housing standard of the area, which has undoubtedly been a very low one.

217. Each Rural District Council was informed that at the end of 1933 an up-to-date statement as to the housing position in the respective areas would be required and that the County Council would not be satisfied unless the inspection and recording of houses was conducted at a rate which would ensure that all dwellings in the district were surveyed within a period of not more than five years.

218. The letter asking for this statement contained the following questions, namely—

- (a) Are the records under the Housing (Inspection of District) Regulations now available for all houses occupied by persons of the working classes ?
- (b) Have the records been made up-to-date within the last five years ?
- (c) If up-to-date records are not available, by what date will the Authority undertake that these will be completed ?
- (d) As a result of the inspection of the District, what number of houses represented as being unfit for habitation and requiring demolition are still occupied, and what steps are proposed to be taken in relation to such unfit houses ?
- (e) What number of houses represented as requiring repair or renovation to bring them up to a reasonable standard, are still outstanding and whether statutory notices have been served on the responsible persons ?
- (f) Is information as to the assistance under the Housing (Rural Workers) Act 1926 brought by Officers of the Authority to the notice of owners of properties in need of repairs and occupied by agricultural workers ?

#### **Housing (Rural Workers) Acts.**

219. Fifty-nine houses were reconditioned under the above named Acts in 1933.



220. The Worcestershire pamphlet was revised and widely distributed throughout the County. In this connection certain of the modifications based on the experience of the Devonshire County Council, with the permission of that Authority were included in the Worcestershire pamphlet.

221. One Rural Authority made application to the Ministry to have the powers under the Acts transferred from the County Council to the Rural Authority. Subsequently this application was withdrawn and the County Council is the Authority for the whole County.

222. Investigations to see that the restrictions as to rentals and tenancies are complied with have been continued regularly. In three instances action was necessary ; in one case the rental charged was in excess of the maximum fixed and an adjustment was made. In the other two instances the occupants could not be approved under the Act as Rural Workers or persons of similar status. The owner was given the choice of refunding the grant or arranging for other tenants to occupy the dwellings ; he followed the latter course.

223. The action of the County Council in advising owners to insure all properties, reconditioned under the Act, against the risk of fire has met with good response ; practically every property is now insured.

224. The administrative arrangements proposed when the County Scheme was first adopted have been continued and the Sanitary Inspectors of the Rural Districts continue to give valuable assistance. Increasing use is being made of members of the Special Committee who assist doubtful cases by visiting properties and become familiar with the details of applications which materially shortens the procedure when discussed in Committee. I may, perhaps without presumption, say that no Committee with which I am concerned takes a more practical interest in the work for which they are responsible than the Rural Workers Act Committee.

225. I have made no reference this year to Slum Clearance or housing in the Urban Districts. The programmes under the former are submitted direct to the Ministry of Health and in only about half the instances have I any direct knowledge of the scope of the proposals.

### **Town Planning.**

226. On the 1st February 1934, the County Town Planning Officer (Mr. H. Robinson) commenced duty and he is now engaged in consulting with the Local Authorities in the County as a preliminary to preparation of a Town Planning Scheme for such parts of the County as are not already included in other town planning districts.

### **SECTION E.**

#### **Inspection and Supervision of Food.**

227. The report of Mr. C. C. Duncan, the County Analyst, which deals with the administration of the Food and Drugs Acts, is published separately.

#### **Milk Supply.**

228. According to the returns furnished to me by the officials of Local Sanitary Authorities, the number of registered Dairy Farms in the County in 1933 was 1,709, and the total number of cows 16,566.

229. I have reason to believe, however, that the actual number of dairy cows is approximately 24,000. I am afraid that Registration of premises is far from complete in some districts.

230. A Conference has recently been held with the National Farmers' Union to consider a request by them that routine inspection of dairy cattle should be undertaken, but at present the decision of the County Council in this matter has not been given.

#### *Milk (Special Designations) Order, 1923.*

231. The following are the numbers of "Grade A" milk licences issued by the County Council, namely :—

Production Licences	—	—	7
Production and Bottling Licences	—	—	12

232. Licences for the production of "Certified" and "Grade A (T.T.)" milk are issued by the Minister of Health and information has been received that the following numbers of such licences were issued by the Minister to farmers in this County, namely :—

Certified	—	—	—	3
Grade A (T.T.)	—	—	—	4

233. The Council supply "Grade A (T.T.)" milk to the Open Air School. At some Elementary Schools "Grade A" milk is supplied to the children by means of Milk Clubs.



*Clean Milk Competitions.*

234. Miss Pritchard (County Dairy Instructress) has given me the following information with regard to the number of entries during recent years, namely :—

1925.	1926.	1927.	1928.	1929.	1930.	1931.	1932.	1933.	1934.
9	8	15	12	21	23	24	23	15	17

235. The entries in 1934, with two exceptions, were from new competitors.

236. A study of the above figures relating to Graded producers and the Clean Milk Competitions provides food for thought. If one accepts the number of registered producers in the County at the present low figure and if each producer had one year's experience of a clean milk competition it would take more than a century at the present rate to complete the round in Worcestershire which is not a specialised Dairy County.

237. I propose to make no comments on the shortcomings of Milk Grades or other debatable milk problems as the various views have already received ample publicity.

*Milk and Dairies (Consolidation) Act, 1915.*

No routine inspection of Dairy Herds is undertaken.

238. Following notices from outside Authorities a number of farms were visited, 64 samples in all were taken for Biological test. Eleven of this number were returned as positive. Twelve cows were slaughtered as a result of these visits.

SECTION F.

**Prevalence of, and Control over, Infectious and other Diseases.**

239. The Survey required by Section 63 of the Local Government Act, 1929, as to the Hospital accommodation in the County has been made and conferences have been held with all the Local Sanitary Authorities and Hospital Committees.

240. Considerable difficulty in completing the County Scheme is being experienced. It seems probable that the limitations placed by the enactments such as the Isolation Hospitals Acts will prevent the adoption of what is really the most suitable policy namely the larger units serving bigger areas.

241. The following Table shows the number of cases of infectious disease notified in the County in 1933.

242. Owing to the many changes in boundaries the deaths occurring during the first Quarter of the year in the old North Bromsgrove, Lye and Wollescote, Feckenham, Rock, Tewkesbury and Winchcombe Districts are not included in this Table.





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District.	Smallpox.		Scarlet Fever.		Diphtheria and Membranous Croup.		Enteric Fever.		Puerperal Fever.		Puerperal Pyrexia	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		Ophthalmia Neonatorum.		Acute Poliomyelitis & PolioEncephalitis.		Pneumonia		Encephalitis Lethargica.	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths (b)	Cases	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths (a)	Cases	Deaths
<i>Urban</i>																							
Bewdley Borough	-	-	11	-	1	-	-	-	2	-	1	3	1	-	1	-	-	-	-	7	2	-	-
Bromsgrove	-	-	88	2	29	2	-	1	3	1	3	17	5	5	3	1	-	-	-	21	21	-	-
Droitwich Borough	-	-	1	-	-	-	-	-	-	-	-	3	1	1	1	-	-	-	-	3	3	-	-
Evesham Borough	-	-	22	1	93	3	2	-	1	-	3	4	8	2	-	-	-	-	-	11	-	-	-
Halesowen	-	-	63	3	17	1	1	-	3	3	7	31	20	17	8	3	-	-	63	9	4	3	
Kidderminster Borough	-	-	142	1	1	-	10	3	1	1	5	41	20	25	4	4	3	-	36	26	1	1	
Malvern	-	-	43	-	9	-	1	-	1	-	1	14	15	8	4	1	-	-	51	10	-	-	
Oldbury	-	-	217	4	19	1	-	-	2	2	8	76	23	8	2	11	-	-	86	42	-	2	
Redditch	-	-	163	-	105	6	-	-	2	2	7	28	14	4	2	1	-	-	22	7	-	-	
Stourbridge Borough	-	-	92	-	9	-	-	-	-	-	7	31	24	8	4	8	1	1	54	24	-	-	
Stourport	-	-	12	1	2	-	1	-	-	-	19	5	-	6	2	1	-	1	6	5	-	1	
Totals	-	-	854	12	285	13	15	4	9	9	61	253	131	84	31	33	-	3	1	346	160	5	7
<i>Rural</i>																							
Bromsgrove	-	-	45	-	8	2	2	-	-	-	3	13	8	6	1	-	-	-	13	12	-	2	
Droitwich	-	-	21	-	2	-	1	-	-	-	-	9	6	2	-	-	-	-	5	6	-	1	
Evesham	-	-	5	-	20	1	-	-	-	-	2	11	9	4	1	1	-	-	5	9	-	-	
Kidderminster	-	-	4	-	-	-	-	-	-	-	2	3	2	2	1	1	1	1	5	6	-	-	
Martley	-	-	16	-	-	-	2	-	-	-	4	8	5	6	1	-	-	-	23	10	1	-	
Pershore	-	-	10	-	1	-	-	-	1	-	4	10	8	5	2	1	-	-	15	7	-	-	
Tenbury	-	-	3	-	1	1	-	-	-	-	1	1	3	4	1	1	-	-	2	4	-	-	
Upton-on-Severn	-	-	10	-	1	1	2	-	-	-	3	10	10	6	1	-	-	-	31	9	-	-	
Totals	-	-	114	-	33	5	7	-	-	1	19	65	51	35	8	4	-	1	1	99	63	1	3
Grand Totals	-	-	968	12	318	18	22	4	9	10	80	318	182	119	39	37	-	4	2	445	223	6	10

(a) The deaths refer to all cases of pneumonia, not those which are notifiable.

(b) The deaths refer to cases of Puerperal Sepsis.

Anthrax. Two cases were notified in Kidderminster Borough.

Cerebro Spinal Fever. Three cases were notified, two at Oldbury, and one at Malvern.

Malaria. Two cases were notified, one at Oldbury and one at Stourbridge.





243. Information giving a comparison of the number of cases notified in 1933 with those in previous years will be found in the following paragraphs.

*Smallpox.*

244. No case was notified in 1933 and during the last twenty years only eight cases (one death) have been recorded.

*Scarlet Fever.*

Average annual number of cases 1913-1932	=	597
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Average annual number of deaths 1913-1932	=	6
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No. of cases 1933	-	968
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No. of deaths 1933	-	12
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245. There was a considerable increase in the number of cases notified last year and this increase was confined to the Urban Districts.

246. Of the 854 Urban cases, 217 occurred in Oldbury, 163 in Redditch and 142 in Kidderminster.

247. The deaths numbered 12 but there was no unusual fatality rate in any particular district.

248. Some difficulty was experienced in providing Hospital accommodation particularly in connection with the Bromsgrove, Droitwich and Redditch Hospital area where the outbreak of Scarlet Fever coincided with a severe outbreak of Diphtheria.

249. I was asked to meet the Hospital Committee and the policy of selecting Scarlet Fever cases for Institutional treatment was agreed upon.

250. Dr. H. E. Collier, Medical Officer of Health, Redditch where both Scarlet Fever and Diphtheria were prevalent states "infectious disease has been prevalent during the year 1933 especially Scarlet Fever and Diphtheria. It is noted also that Erysipelas and Puerperal Pyrexia and Fever showed a marked increase. In several cases of Puerperal Pyrexia direct contact between the patient and cases of Scarlet Fever could be traced. The cases of Scarlet Fever were of a more severe type than has been prevalent during the last few years although there were no deaths from the disease. There has been a higher incidence of Nephritis."

251. Dr. G. Cochrane, Medical Officer of Health, Bromsgrove Urban District deals with the difficulties experienced in providing Isolation Hospital accommodation.

*Diphtheria.*

Average annual number of cases 1913-1932	-	245
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Average annual number of deaths 1913-1932	-	29
---	---	----

No. of cases 1933	-	318
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No. of deaths 1933	-	18
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252. An increase in the number of cases under this heading has to be reported and again the Urban Districts suffered, particularly the Evesham Borough (93 cases) and Redditch Urban District (105 cases).

253. Of the 13 Urban deaths 3 occurred in Evesham and 6 in Redditch.

254. Dr. Collier, Medical Officer of Health, Redditch states that "the Diphtheria epidemic assumed alarming and serious proportions during the latter months of the year and the early months of 1934. Cross-infection occurred in a number of cases (patients suffering from both diseases, Scarlet Fever and Diphtheria). During the early months of 1934 Hospital accommodation became entirely inadequate. Although properly speaking this should not be included in the 1933 report I may say that the whole question of Hospital accommodation in this area has been very carefully reviewed with a view to increasing co-operation between the various Infectious Diseases Hospitals in the County during the periods of epidemic."

255. Dr. Collier gives details of the immunization undertaken by Dr. A. B. Follows (Assistant County Medical Officer). During November and December 306 children completed the course and by July 1934 the number exceeded 600.

256. Dr. G. E. Harthan, Medical Officer of Health, Evesham Borough states that the epidemic which began in the last quarter of 1932 continued throughout 1933 with some little remission during the mid-summer months. There were 93 cases in the Borough during the year, 89 being treated in Hospital and 3 deaths occurred.

257. The severe epidemic in Evesham during the years 1932, 1933 and 1934 was fortunately not explosive in character, the cases occurring over a considerable period and no real difficulty was experienced in providing the necessary Hospital accommodation.



258. Dr. Harthan comments on the comparative freedom of Evesham from epidemics of Diphtheria since 1913-14, and that the susceptibility rate of the population under 16 years of age might be expected to be high. This was confirmed by the age incidence of the notified cases, 83 out of 93 being under 16 years of age. He concludes " Since immunity can be artificially produced by inoculation it would be rational to seek by this method to make complete the limited, partial and haphazard immunization blindly produced by natural causes."

259. In view of suggestions I have advanced for a combination between Evesham Borough, Evesham Rural and Pershore Rural Districts for the provision of Isolation Hospital accommodation, it is of interest to note, that the experience of a number of years that big epidemics seldom occur in these areas simultaneously is borne out by the experience of 1933. Whilst there were rather more than the average cases in the Rural District of Evesham only one case was notified in the Pershore Rural District during the year.

#### *Enteric Fever.*

Average annual number of cases 1913-1932	-	18
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Average annual number of deaths 1913-1932	-	2
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Number of cases 1933	-	22
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Number of deaths 1933	-	4
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#### *Kidderminster Borough.*

260. Dr. J. R. Craig, Medical Officer of Health, gives details of the water-borne outbreak of Enteritis: ten cases of Typhoid (3 deaths) arising from this cause. The outbreak is of considerable interest as it appears to have been associated with the drought of 1933. There was a previous and more serious water-borne epidemic of Typhoid in Kidderminster in 1884.

261. The onset in most cases was acute. High temperatures were recorded in a few cases but in the majority of instances there was marked vomiting and diarrhoea usually persisting for about 48 hours; vomiting occurring first and diarrhoea within 24 hours. Most of the patients recovered within a few days but relapses were not uncommon. Mention has already been made that Typhoid Fever subsequently developed in a few cases.



262. It is impossible to give any accurate figure of the number of persons affected as many cases were very mild and did not seek medical advice. There can be no doubt that the number was large ; an estimate of 4,000 cases would probably not be an over estimate of the facts.

263. Prompt action was taken by the Borough as soon as the cause of the illness was ascertained. I agree with Dr. Craig that in view of the magnitude of the outbreak it was extremely fortunate that the resulting number of cases of Typhoid Fever was not larger.

264. At least one secondary case occurred outside the Borough. The mother of a child attending the Kidderminster High School developed Para-Typhoid. Her daughter had suffered from the usual symptoms (but was not a clinical case of Typhoid). The dates of history however make it almost certain that this case originated from the illness of the daughter.

265. The source of the contamination of the water supply was not ascertained. Every clue followed up led to a dead end and argument could be produced to counter most suggestions.

266. The fact that both supplies appeared to have become contaminated added to the difficulty of accepting a single and exceptional source of pollution. Although the sewage farm may be unconnected with this outbreak it cannot be doubted that it is undesirable to have a sewage farm in the collecting area.

*Upton-on-Severn Rural.*

267. Dr. M. J. Quirke, Medical Officer of Health in referring to a death in the City of Worcester from Enteric Fever states that the fatal case was attributed to the drinking of water from Carey's Brook which receives the sewage effluent from the Mental Hospital.

268. Referring to the two notified cases he comments " Two cases of Enteric Fever were notified. One occurred at the Mental Hospital the source of infection being a carrier. The other case showed very little in the way of symptoms but exhibited a positive Widal reaction. The patient had suffered from a previous attack years ago and had been inoculated with T.A.B. vaccine twice since then."

269. The cases arising in other districts do not call for comment.

*Measles.*

Average annual number of deaths 1913–1932 – 39

Number of deaths 1933 – 22

270. The only indication of the prevalence or otherwise of Measles is the number of school closures and certificates issued for low attendances.

271. It was necessary for 24 Schools to be closed on account of this disease.

272. It is exceptional for cases of measles to be admitted to Isolation Hospitals in this County.

*Cerebro Spinal Meningitis.*

273. Three cases were notified, two at Oldbury and one at Malvern.

*Cancer.*

Average annual number of deaths 1913–1932 – 380

Number of deaths 1933 – 479

274. The change in the age constitution of the population should be considered before any deductions are drawn.

**Vaccination.**

275. The records of the Vaccination Officers and Public Vaccinators have been scrutinised each quarter.

276. The Annual Returns of Vaccination Officers with respect to infants whose births are registered are not made until 13 months after the completion of the year to which they relate ; the last available figures are those for the year 1932.

277. Of the 4,251 births reported by the several Vaccination Officers in the Administrative County as having been registered during the year 1932, the number which, at the time the return was made, had been registered as successfully vaccinated was 1,717 (being 40·4 per cent. of the whole) and the number registered as having died unvaccinated was 183 (or 4·3 per cent. of the whole). Of the remaining children, 19 (or ·5 per cent. of the whole) had been



registered as insusceptible to vaccination, or as having had smallpox; 24 (or .6 per cent.) as having their vaccination postponed by medical certificate; 2,225 (or 52.3 per cent.) in respect of whom certificates of conscientious objection were received; and 77 (or 1.8 per cent.) as "removed" or "not found," leaving 6 (or .1 per cent.) not accounted for. If the deaths that took place before vaccination be deducted from the births returned by these Officers, it appears that, at the time of the return, of the surviving 4,068 children, there were registered 42.2 per cent. as successfully vaccinated; .5 per cent. as either insusceptible to vaccination or as having had smallpox; .6 per cent. as under medical certificate of postponement; 54.7 per cent. in respect of whom certificates of conscientious objection to vaccination had been obtained; and 1.9 per cent. as "removed" or "not found," leaving .1 per cent. as still unaccounted for as regards vaccination.

278. The numbers of persons successfully vaccinated and re-vaccinated at the cost of the rates during the year ended the 30th September 1933, are given in the following Table :—

Number of Successful Primary Vaccinations of persons :—			Number of Successful Re-vaccinations.
Under one year of age.	One year and upwards.	Total.	
1387	88	1475	28

### **Hop-picking.**

279 The hop-picking season of 1933 was characterised by fine weather. The conditions were the subject of much criticism by outside authorities. I can only express the view that there was a distinct improvement in scavenging arrangements, in the digging of latrine trenches, and in the health of the pickers generally.

280. In spite of the drought there was an ample supply of water available on the farms.

281. As to the mixing of the sexes, as I have previously reported, there are grounds for criticism, but any improvement in this direction requires not only greater attention on the part of the grower, but greater co-operation and enlightenment on the part of the picker.



### **Mental Hygiene.**

282. The following are the attendances of Worcestershire cases, namely :—

	No. of Cases.	No. of Attendances.
Birmingham General Hospital	— 3	9
Stourbridge Corbett Hospital	— 10	20
Worcester Royal Infirmary	— 7	9

283. The Worcester Clinic is attended by Dr. H. F. Fenton, the Stourbridge and Birmingham Clinics by Dr. A. H. Firth.

The Sessions are held fortnightly.

### **Prevention of Blindness.**

284. The Eye Hospitals in and adjoining the County receive grants from the County Council.

285. The County Scheme is reasonably complete. In order to remove any parental objection when midwives seek medical aid on account of inflammation of or discharge from the eyes of infants, no effort is made to recover any part of the Doctor's fee from the parents.

286. The Worcestershire Association for the Blind continues to efficiently supervise the work among the Unemployable Blind.

287. In respect of this work the local Association received a grant from the County Council amounting last year to £725.

288. Grants are also payable to the Birmingham Royal Institution for the Blind in respect of the Home Workers Scheme ; to the Stourbridge Workshops for the Blind ; and to other Institutions receiving Blind persons.

289. During the year the earnings of the Home Workers were examined, and in one case where it was considered that the earnings were too low, the case was transferred to the list of Unemployable Blind.

### **Tuberculosis.**

290. The Report of the Chief Tuberculosis Officer (Dr. H. Gordon Smith) is given as an Appendix to this Report.

### **Assistance from Voluntary Associations.**

291. I have to acknowledge the valuable assistance given by the County Federation of Womens Institutes in connection with Maternity.

292. The Federation has raised a fund from which financial assistance is given in providing suitable home helps who look after the family while the mother is in a Maternity Home.

293. Assistance was given in 41 cases during the year. It is probable that a considerable number of mothers would have been unable to accept the Hospital treatment recommended had there not been a suitable person to look after the home and family during absence.

294. The Halesowen Operatic Society also made a generous grant for a similar purpose to a local committee.

295. The interest displayed by these Societies is very encouraging and represents a distinct asset in the effort to reduce the maternal mortality rate of the County.

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296. I desire to acknowledge the loyal work of the Assistant County Medical Officers, Dentists, Nurses and Clerical Staff.

Your obedient Servant,

WYNDHAM PARKER, M.C.,  
M.B., Ch.B., (Edin.) D.P.H. (Lond.)

County Medical Officer.

Public Health Department,  
County Buildings,  
Worcester.

October 1934.

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# WORCESTERSHIRE COUNTY COUNCIL.

## REPORT OF THE CHIEF TUBERCULOSIS OFFICER FOR THE YEAR 1933.

### *Staff.*

1. Dr. Mary Williams retired in September 1933, and a re-arrangement of duties has taken place by which Dr. Clover undertakes the tuberculosis work in the Malvern and Upton areas.

2. Dr. Williams had carried out tuberculosis work since the amalgamation scheme was initiated. We were very sorry to lose her services and wish her a well-earned rest.

3. No change affecting the tuberculosis scheme occurred in the Nursing staff.

### *Notifications and Deaths.*

4. The following are the notifications and deaths for 1933 together with averages for the previous ten years.

Year.	Notifications.			Deaths.		
	Pul.	Non-Pul.	Total.	Pul.	Non-Pul.	Total.
Average						
1923-32	328	128	456	206	48	254
1933	318	119	437	189	39	228

5. The notifications are slightly lower than last year, and would have been 25 less, if Oldbury had not exceeded its average by this number. Further information on this matter is supplied by Dr. Deaner in an appendix to this Report.

6. Tables I. and II. set out the notifications in age-groups and districts.

7. In Table II. the population in some of these areas is too small for one year's death rate to have any significance



TABLE I.

*Notifications of Tuberculosis during 1933 showing Age Periods.*

Age periods:	under 1 yr.	1-4 (4 yrs.)	5-9 (5 yrs.)	10-14 (5 yrs.)	15-19 (5 yrs.)	20-24 (5 yrs.)	25-34 (10 yrs.)	35-44 (10 yrs.)	45-54 (10 yrs.)	55-64 (10 yrs.)	65 and up- wards	Total.
Pulmonary—												
Males	—	4	6	7	16	23	45	29	18	14	5	167
Females	—	1	6	7	19	32	38	29	9	6	4	151
Non-Pulmonary—												
Males	—	15	17	9	7	6	8	3	2	—	—	70
Females	—	9	13	9	6	2	8	—	1	1	—	49
Total —	3	29	42	32	48	63	99	61	30	21	9	437

District.	Total cases notified 1933.	Population. 1933.	Notification Rate per 1,000 of Population.		Death rates per 1000 of Population.	
			Average 1927-32	1933.	Average 1927-32	1933.
Bewdley Borough	3	3963	2.3	0.75	0.62	0.50
Bromsgrove Urban	17	18580	1.1	0.9	0.75	0.43
* " North Urban	5	2725	1.3	1.8	0.74	0.73
Droitwich Borough	4	4394	1.4	0.9	0.84	0.45
Evesham Borough	6	10610	1.9	0.56	0.93	0.75
Halesowen Urban	48	31910	1.5	1.5	0.86	0.88
Kidderminster Borough	66	29990	2.4	2.2	1.20	0.80
*Lye and Wollescote Urban	2	3053	2.0	0.65	1.20	1.31
Malvern Urban	22	17450	1.0	1.26	0.74	1.09
Oldbury Urban	84	39360	1.7	2.13	0.85	0.63
Redditch Urban	29	21320	1.7	1.36	0.95	0.74
Stourbridge Borough	37	31080	1.17	1.2	0.73	0.90
Stourport Urban	11	6915	1.65	1.6	1.06	0.29
Bromsgrove Rural	19	17770	1.0	1.0	0.62	0.50
Droitwich Rural	11	10640	0.92	1.0	0.79	0.56
Evesham Rural	15	13900	1.3	1.0	0.93	0.72
*Feckenham Rural	3	919	1.3	3.2	0.61	0.00
Kidderminster Rural	5	7778	1.57	0.64	0.94	0.38
Martley Rural	14	11040	1.38	1.3	0.73	0.54
Pershore Rural	15	13250	1.38	1.1	0.62	0.68
*Rock Rural	—	543	2.53	0.0	0.77	1.80
Tenbury Rural	5	5170	1.17	1.0	0.73	0.78
*Tewkesbury (part) Rural	—	532	0.85	0.0	0.80	0.00
Upton-on-Severn Rural	16	12610	1.82	1.3	0.70	0.87
*Winchcombe (part) Rural	—	98.	0.00	0.0	0.00	0.00
	437	315600	1.50	1.38	0.81	0.72

\* The figures for these Districts are for the first three months of the year as on the 1st April 1933 the Districts were amalgamated with other Districts.

New Cases and Mortality.

8. Table III. sets out the number of new cases becoming known to us and deaths occurring in the County during the year.

TABLE III.

Age Periods.			New Cases.				Deaths.			
			Pulmonary.		Non-Pulmonary		Pulmonary.		Non-Pulmonary.	
			M.	F.	M.	F.	M.	F.	M.	F.
0	-	-	-	-	5	-	-	-	1	-
1	-	-	4	1	15	10	1	1	5	1
5	-	-	6	6	20	13	-	1	1	1
10	-	-	7	7	11	11	-	1	1	2
15	-	-	17	21	9	6	5	9	5	3
20	-	-	24	35	6	2	20	16	1	-
25	-	-	51	39	8	9	33	24	1	3
35	-	-	36	31	4	-	19	19	1	1
45	-	-	19	11	2	1	24	7	-	1
55	-	-	16	8	1	1	12	7	-	-
65 and upwards	-	-	6	4	-	1	4	3	-	2
TOTALS -			186	163	81	54	118	88	16	14

Deaths of Unnotified Cases.

9. Thirty cases who had not been notified died from tuberculosis during the year. In 22 instances, there was satisfactory reason for such non-notification and in 8 cases the usual letter requesting an explanation was sent to the certifying Practitioner. In 4, the Doctor thought the case had been notified elsewhere ; in 2, the diagnosis was only made at death ; (one at a Post-Mortem ;) and, in the remaining 2, the notification had been overlooked.

Tuberculosis Regulations 1924.

10. The total number of cases on the registers of Medical Officers of Health at the end of 1933 was :—

			Males.	Females.	Total.
Pulmonary	-	-	712	671	1383
Non-Pulmonary	-	-	298	301	599
			1010	972	1982



*Institutional Treatment.*

11. The average number awaiting admission was 11. In February and March the waiting list rose to 23 and towards the end of the year was down to 2.

12. As a rule any urgent case can be admitted within a week and few new cases have to wait more than 3 or 4 weeks.

13. During the year more cases have been sent to Orthopaedic Hospitals. Two for special reasons have been dealt with in Sanatoria outside the County, and we have had the use of two Worcester City beds at Knightwick for most of the year—the waiting list has thereby been reduced.

*Institutional Treatment.*

14. Table IV sets out the beds available during 1933.

TABLE IV.

	Observa- tion.	Pulmonary Tuberculosis.		Non-Pulmonary Tuberculosis.		Total
		" Sana- torium" Beds.	" Hos- pital " Beds.	Disease of Bones and Joints.	Other Con- ditions	
Adult Males .....	2	37	26	8		73
Adult Females .....	1	33	9	4		47
Children under 15 .....	2	9	—	20		31
Total .....	5	79	35	32		151

TABLE V.  
RETURN SHOWING THE EXTENT OF RESIDENTIAL TREATMENT.

	Adults.	M. F.	In Institutions on Jan. 1.	Admitted during the year.	Discharged during the year.	Died in the Institutions.	In Institutions on Dec. 31.
Number of Patients .....	Adults.	M.	62	159	141	25	55
		F.	51	133	130	17	37
	Child- ren.		24	41	39	1	25
Number of Observation Cases	Adults	M.	2	27	23	—	6
		F.	6	20	24	—	2
	Child- ren.		2	3	4	—	1
	Total		147	383	361	43	126

Observation for purpose of diagnosis.	Classification on admission to the Institution.				Condition at time of discharge.	Duration of Residential Treatment.												Totals.			Grand Totals.
						Under 3 months			3-6 months			6-12 months			More than 12 months						
						M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
PULMONARY TUBERCULOSIS.	Class T.B. minus	Quiescent - - -	12	20	2	7	8	2	1	-	-	-	-	-	20	28	4	52			
		Not Quiescent - - -	6	10	-	7	4	-	3	2	1	-	-	-	16	16	1	33			
		Died in Institution - - -	3	1	1	-	-	-	1	-	-	-	-	-	4	1	1	6			
	Class T.B. plus Group 1.	Quiescent - - -	1	1	-	-	1	1	-	-	-	-	-	-	1	2	1	4			
		Not Quiescent - - -	1	1	-	-	-	-	1	1	-	1	1	-	3	3	-	6			
		Died in Institution - - -	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	1			
	Class T.B. plus Group 2.	Quiescent - - -	-	-	-	1	1	-	2	-	-	-	-	-	3	1	-	4			
		Not Quiescent - - -	20	18	1	28	22	-	4	16	-	6	1	-	58	57	1	116			
		Died in Institution - - -	5	4	-	3	2	-	2	1	-	1	1	-	11	8	-	19			
	Class T.B. plus Group 3.	Quiescent - - -	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
		Not Quiescent - - -	6	4	-	4	4	-	5	2	-	1	1	-	16	11	-	27			
		Died in Institution - - -	9	4	-	-	1	-	-	1	-	-	-	-	9	6	-	15			
NON-PULMONARY TUBERCULOSIS.	Bones and Joints	Quiescent - - -	3	1	2	1	1	3	1	-	3	1	3	4	6	5	12	23			
		Not Quiescent - - -	8	-	2	2	-	2	1	-	1	-	1	2	11	1	7	19			
		Died in Institution - - -	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
	Abdominal.	Quiescent - - -	1	-	3	1	-	2	-	-	-	1	-	1	3	-	6	9			
		Not Quiescent - - -	-	1	1	1	1	-	-	-	1	-	-	-	1	2	2	5			
		Died in Institution - - -	1	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1			
	Other Organs.	Quiescent - - -	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
		Not Quiescent - - -	2	1	-	-	1	-	-	1	-	-	-	1	2	3	1	6			
		Died in Institution - - -	-	1	-	-	-	-	-	-	-	-	-	-	-	1	-	1			
	Peripheral Glands	Quiescent - - -	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	1			
		Not Quiescent - - -	1	1	3	-	-	-	-	-	-	-	-	-	1	1	3	5			
		Died in Institution - - -	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-			
Observation for purpose of diagnosis.						Pulmonary Tuberculosis.						Non Pulmonary Tuberculosis.						Totals.			Grand Totals.
	Stay under 4 weeks.			Stay over 4 weeks.			Stay under 4 weeks.			Stay over 4 weeks.											
	Tuberculous - - -	4	1	-	1	1	-	1	-	-	-	2	-	6	4	-	10				
	Non-tuberculous - - -	-	-	-	9	13	3	-	-	-	2	1	1	11	14	4	29				
	Doubtful - - -	1	2	-	3	4	-	-	-	-	2	-	-	6	6	-	12	51			





*Immediate Results of Institutional Treatment.*

15. Three hundred and ninety-four patients were discharged from Institutions during the year :—

Pulmonary cases	—	—	—	—	283
Non-pulmonary cases	—	—	—	—	70
Not tuberculous cases	—	—	—	—	41
					<hr/>
					394
					<hr/>

16. Of the pulmonary cases, 192 had a positive sputum and 91 negative.

17. Sixty pulmonary and 33 non-pulmonary cases were brought to a stage of quiescent disease, while all of them had learned the benefit of plenty of fresh air and a regular life, and had been taught how to avoid being a danger to other people.

TABLE VII.  
*Dispensary Work.*

Dispensary.	Address.	Medical Officer.	Day and Time.	Total No. of Attendances 1933.	Average attendance per Session 1933.
Bromsgrove	Over 98 High Street	Dr. Deaner	Tuesday, 3 p.m.	269	5.6
Halesowen	14 Laurel Lane	Dr. Deaner	Wednesday, 5 p.m.	434	8.4
Kidderminster	General Hospital	Dr. Deaner	Thursday, 2 p.m. and 5 p.m.	713	13.7
Oldbury	25 Church Street	Dr. Deaner	Monday, 5 to 7 p.m.	975	20.3
Redditch	Elm Road	Dr. Deaner	Friday, 2 to 4 p.m.	358	7.0
Stourbridge	Dispensary	Dr. Corlett	Monday, 5 p.m.	350	7.2
Worcester	Shirehall Yard	Dr. Clover	Wednesday, 3 p.m.	200	4.0



Diagnosis.	Pulmonary.						Non-Pulmonary.						Total.			
	Adults.			Children.			Adults.			Children.			Adults.		Children.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	M.	F.	M.	M.	F.	M.	F.
A.—NEW CASES examined during the year (excluding contacts) :																
(a) Definitely tuberculous .....	120	114	9	8	23	16				30	22		143	130	39	30
(b) Doubtfully tuberculous .....	—	—	—	—	—	—				—	—		39	31	15	26
(c) Non-tuberculous .....	—	—	—	—	—	—				—	—		64	84	29	28
B.—CONTACTS examined during the year :—																
(a) Definitely tuberculous	5	7	3	4	—	—				3	1		5	7	6	5
(b) Doubtfully tuberculous	—	—	—	—	—	—				—	—		3	10	15	13
(c) Non-tuberculous .....	—	—	—	—	—	—				—	—		54	162	141	190
C.—CASES written off the Dispensary Register as																
(a) Recovered .....	16	32	9	7	8	14				20	30		24	46	29	37
(b) Diagnosis not confirmed or non-tuberculous (including cancellation of cases notified in error) .....	—	—	—	—	—	—				—	—		140	266	181	232
D.—NUMBER OF PERSONS on Dispensary Register on December 31st :—																
(a) Diagnosis completed .....	546	493	85	76	84	89				139	141		630	582	224	217
(b) Diagnosis not completed	—	—	—	—	—	—				—	—		58	57	46	50

TABLE VIII.—*Continued.*

1.	Number of persons on Dispensary Register on January 1st	—	1789
2.	Number of patients transferred from other areas and of “lost sight of” cases returned	— — — — —	36
3.	Number of patients transferred to other areas and cases “lost sight of”	— — — — —	92
4.	Died during the year	— — — — —	183
5.	Number of attendances at the Dispensary (including Contacts)	—	3338
6.	Number of consultations with medical practitioners :—		
	(a) Personal	— — — — —	152
	(b) Other	— — — — —	1162
7.	Number of other visits by Tuberculosis Officers to Homes	—	2872
8.	Number of visits by Nurses or Health Visitors to Homes for Dispensary Purposes	— — — — —	12964
9.	Number of—		
	(a) Specimens of sputum, etc., examined	— —	402*
	(b) X-Ray examinations made in connection with Dispensary work	— — — — —	303
10.	Number of “Tb plus” cases on Dispensary Register on December 31st	— — — — —	502

Tables IX. and X. show the actual numbers of pulmonary and non-pulmonary cases on the register, and their condition at the end of 1933.

\*In addition, 1765 samples of sputum were examined from Worcestershire in-patients in County Institutions and County patients sent by General Practitioners.

TABLE VIIIa.

NUMBER OF BEDS AVAILABLE FOR THE TREATMENT OF TUBERCULOSIS ON THE  
31ST DECEMBER, 1933.

IN PUBLIC ASSISTANCE INSTITUTIONS BELONGING TO THE COUNCIL (OR TO THE  
CONSTITUENT AUTHORITIES OF THE JOINT COMMITTEE).

Name of Institution.	For PULMONARY cases.		For Non-PULMONARY cases		TOTAL
	Adults	Children under 15	Adults	Children under 15	
Evesham -	2	—	—	—	2
Martley -	1	—	—	—	1
Kidderminster -	7	—	—	—	7

Return showing the Extent of Residential Treatment provided during the year in Public Assistance Institutions for persons chargeable to the Council (or to the Constituent Authorities of the Joint Committee).

		In Institutions on January 1st	Admitted during the year.	Discharged during the year	Died in the Institution.	In Institutions on Dec. 31st
Number of patients suffering from pulmonary tuberculosis admitted for treatment	Adult Males -	3	11	6	5	3
	Adult Females	2	—	1	—	1
	Children -	—	—	—	—	—
	TOTAL -	5	11	7	5	4
Number of patients suffering from non-pulmonary tuberculosis admitted for treatment.	Adult Males -	1	1	—	1	1
	Adult Females -	—	—	—	—	—
	Children -	—	2	—	1	1
	TOTAL -	1	3	—	2	2
GRAND TOTAL -		6	14	7	7	6





TABLE IX.  
PULMONARY.

Condition at the time of the last record made during the year to which the return relates.				Previous to 1926.					1926.					1927.					1928.					1929.					1930.					1931.					1932.					1933.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
					Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)		Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
(a) Remaining on Dispensary Register on 31st December.				Adults	M.	1	1	-	-	1	-	-	-	-	-	-	-	-	-	-	5	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

\* In addition to these totals and prior to 1921 there are

Dead - - Unclassified 1159.

Lost sight of - Unclassified 496.





TABLE X.  
NON-PULMONARY.

Condition at the time of the last record made during the year to which the return relates.				Previous to 1926.					1926.					1927.					1928.					1929.					1930.					1931.					1932.					1933.					
				Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total	Bones and Joints.	Abdominal.	Other Organs.	Peripheral Glands.	Total											
(a) Remaining on Dispensary Register on 31st December.	Disease arrested.	Adults	M.	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	1	-	1	1	3	-	-	-	-	-	1	-	-	-	1	2	1	-	-	-	-	-	-								
			F.	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	2	1	-	-	-	-	-	-								
	Disease not arrested.	Children	2	-	1	-	3	-	-	-	1	1	-	-	-	-	-	-	-	2	-	-	2	4	-	-	-	2	2	1	-	-	2	3	2	1	-	5	8	1	2	-	-	3	-	-	-	-	
			Adults	M.	6	-	-	-	6	-	-	-	-	-	1	-	-	-	1	2	-	-	-	2	6	-	1	-	7	2	1	1	-	4	5	4	1	1	11	5	2	1	1	9	7	6	3	3	19
		F.	4	1	1	1	7	3	-	-	-	3	1	-	1	-	2	-	-	-	-	-	-	1	2	1	1	5	5	2	-	1	8	3	3	1	2	9	4	2	1	1	8	6	4	4	-	14	
Condition not ascertained during the year.	Children	21	-	1	1	23	8	2	-	-	10	7	1	-	3	11	8	4	-	5	17	9	6	1	6	22	7	3	3	8	21	13	7	1	9	30	10	10	2	10	32	10	18	2	24	54			
	Total on Dispensary Register at 31st December.	37	2	6	6	51	13	3	-	1	17	11	3	2	4	20	17	9	2	11	39	17	12	3	16	48	17	10	4	18	49	28	19	3	22	72	25	24	5	16	70	23	28	9	27	87			
(b) Not now on Dispensary Register and reasons for removal therefrom.	Transferred to Pulmonary			-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-		
	Discharged as Recovered.	Adults	M.	44	8	7	20	79	3	2	-	3	8	1	1	-	4	6	2	4	1	3	10	2	1	-	3	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
			F.	38	18	6	34	96	3	1	-	2	6	1	3	-	5	9	-	4	-	3	7	1	3	-	-	4	1	-	-	1	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
	Lost sight of, or otherwise removed from Dispensary Register	Children	60	44	13	81	198	6	15	4	6	31	4	8	-	11	23	2	7	2	7	18	3	13	2	8	26	2	5	-	2	9	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
			Adults	M.	19	4	6	1	30	2	-	1	-	3	3	1	3	2	9	4	1	-	-	5	2	-	-	-	2	-	2	1	-	3	1	-	3	-	4	2	-	1	1	4	1	2	-	-	3
		F.	7	10	3	6	26	1	-	-	-	1	4	3	1	2	10	1	3	-	-	4	1	-	1	2	4	1	-	-	-	1	-	1	-	1	-	3	-	-	-	3	-	-	-	-	-	-	
	Dead.	Children	15	16	7	3	41	-	3	1	2	6	1	3	12	-	16	3	3	2	-	8	-	-	1	2	3	1	1	2	-	4	-	1	-	1	-	1	-	1	-	1	-	1	2				
Total written off Dispensary Register.			225	110	50	174	559	31	28	6	22	87	29	27	17	34	107	25	34	9	27	95	18	39	6	24	87	10	13	4	9	36	6	7	4	3	20	10	6	4	3	23	4	4	-	2	10		
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary).				262	112	56	180	610	44	31	6	23	104	40	30	19	38	127	42	43	11	38	134	35	51	9	40	135	27	23	8	27	85	34	26	7	25	92	35	30	9	19	93	27	32	9	29	97	



*Dispensaries.*

18. There are 7 Dispensaries in the County covering the more densely populated areas. The work in the southern part of the County is carried out by home visits. The number of attendances at the Dispensaries have generally increased, and it is hoped in the near future to have better premises at Oldbury and Halesowen.

*Contacts.*

19. Six hundred and eleven contacts were examined during the year as compared with 516 in 1932 and 449 in 1931. Twenty-three of these (3·8%) were found to be tuberculous and 41 sufficiently suspicious to warrant further observation.

*Environmental Conditions.*

20. The routine procedure of obtaining reports by the Health Visitors on environmental conditions has been continued. Each of these reports is referred to the Tuberculosis Officer, and all possible action is taken to remedy any defects.

*Extra Nourishment.*

21. Seventy-three patients received extra nourishment during the year. The reduction to 4s. 6d. per week for each patient during the summer months has been continued, and has enabled more patients to be dealt with.

*Nurses' Visits.*

22. Twelve thousand nine hundred and sixty-four supervisory visits were made to patients by Health Visitors and Association Nurses, and 14 patients received 642 visits for special nursing.

*Shelters.*

23. The shelters (39) continued to be in full use during the year. One has been sold as it was not considered to be worth the cost of repairing.

24. Twenty-two shelters were moved from one patient to another during the year.

25. We should like all infectious cases, who cannot have a room to themselves, to have a shelter, but in the most congested areas where this would be most desirable it is generally impossible to find a suitable site for the shelter.

*Prevention of Tuberculosis Regulations 1925.**Public Health Act 1925. Sect. 62.*

26. No action was taken under either of these enactments.

27. Two patients were found to be working in connection with milk, but on advice this has been stopped.

*Non-Pulmonary Tuberculosis.**In-patient treatment.*

28. Sixty-eight cases of bone tuberculosis were treated in Orthopaedic Hospitals during 1933. Thirty-two were spine cases and the remainder other bones and joints.



29. The great majority of these were treated at the Birmingham Royal Cripples' Hospitals, and a report on discharge of all cases is included in Table VI.

*Out-patient treatment.*

30. The Clinics at Stourbridge, Redditch, Worcester and Broad Street, Birmingham, continue their very satisfactory work. There were 285 attendances by cases of tubercle.

*X-Rays.*

31. Three hundred and three cases were X-rayed during the year. This is slightly less than the previous year.

32. The sessional basis has been continued, and although quite satisfactory, it is felt that less delay would occur in urgent cases if patients attended when required, rather than having to wait for a group to be formed.

33. The question of endeavouring to arrange for the use of apparatus at other Hospitals in the County is under consideration.

*Ultra-Violet Ray Treatment.*

34. Fourteen cases have received this treatment at Knightwick Sanatorium and Worcester Royal Infirmary.

*Dental Treatment.*

35. The arrangement by which a Dentist visits the patients at Knightwick Sanatorium has been continued. Certain other patients have been treated while at Hill Top Hospital.

36. Fifty-three patients were dealt with by extraction of carious teeth during the year.

*Artificial Pneumothorax Treatment.*

37. This treatment has been continued in certain suitable cases.

38. During 1933, 26 new cases were attempted. Twenty-one of these were successful and the treatment is being continued ; 5 were unsuccessful.

39. The condition at 31 December 1933 of the 24 cases who were continuing this treatment from 1932 was :—

Doing well and continuing refills	—	—	14
„ „ refills discontinued	—	—	6
Not doing well, „ „ against advice			1
Dead — — — — —			3
			—
			24
			—

40. In addition to an improvement in the health of the patient, this treatment has a definite benefit in reducing infection to other people, by diminishing the cough and sputum.

*Propaganda.*

41. Two further lectures were given during 1933—one at Oldbury and one at Halesowen. Each lecture was well attended and reflected great credit on the work of the local officials.

*Tuberculosis in Oldbury.*

42. In view of the increase in notified Tuberculosis in the Oldbury area, Dr. S. Deaner was asked to make an investigation in that area, and appended hereto is a report of his findings and observations.

43. In conclusion, I should like to express my appreciation of the excellent work carried out by Dr. Deaner. His keen interest in his duties have enabled him to obtain that close co-operation with General Practitioners so desirable in a Scheme of this kind. His methodical care in the keeping of records is, I know, much appreciated by the Clerical Staff.

(Signed) H. GORDON SMITH  
M.A., M.B., Ch.B., D.P.H.,  
Chief Tuberculosis Officer.

August 1934.

*Tuberculosis in Oldbury.*

1. The number of notifications of cases of pulmonary tuberculosis for the year 1933 was 76, a marked increase on the previous year when the number was 45.

2. The cases are analysed as below :—

Age group.	All cases.		Total No.	Positive Cases only.		Total No. of Positive cases.
	M.	F.		M.	F.	
0-5	2	0	2	0	0	0
5-10	4	3	7	1	0	1
10-15	1	1	2	0	1	1
15-20	8	5	13	5	2	7
20-25	5	5	10	4	5	9
25-35	8	12	20	7	7	14
35-45	6	7	13	4	5	9
45-60	4	3	7	1	2	3
60 & over	1	1	2	1	0	1
	—	—	—	—	—	—
	39	37	76	23	22	45
	—	—	—	—	—	—

3. The high proportion of sputum positive cases is to be noted, *i.e.* 45 out of 76, as compared with 15 out of 45 in 1932.

4. The number of deaths from pulmonary tuberculosis in 1933 was 23 as compared with 21 in 1932.

5. The following facts are to be noted :—

6. All the men except one were in employment at the time of the onset of the disease. Unemployment *per se* is therefore not a factor. In the majority of cases, long working hours, low wages, and the necessity to continue their work despite illness, are important factors predisposing to and aggravating disease. Excluding the 6 transfer cases, 30 out of 39 positive cases were notified from the north part of the area, extending from around Junction Street to Tat Bank Road. It is from these slum streets that cases are repeatedly notified, and it is here that overcrowding is an important factor. The provision of separate beds and shelters is almost impracticable in the congested area, and re-housing would seem to be the only solution for the prevention and the dilution of infection. In necessitous cases, subsidized re-housing would be practical economy.

7. In all, 31 out of 69 cases had unsatisfactory home conditions.

8. In 41 out of the 76 cases, it was possible on investigation to elicit a family history of tuberculosis. The father was the responsible infecting agent in 9 cases as against the mother in 7 cases.

9. Eleven of the cases were contacts ; of these, 4 were positive cases, three were early cases who did well with treatment, and the remaining four were children who had symptoms and were heavily infected as shown by the intradermal test.



10. Experience in contact work suggests that the search for the infecting agent should be concentrated on the adults rather than on children, who are rarely infecting agents.

11. Ten cases, of whom 9 were positive, gave a history of an "influenzal" onset during the period December 1932—March 1933 when there was an Influenza epidemic. It may be that the epidemic brought to light a few cases that might have gone on unsuspected.

12. Thirteen of the 39 positive primary notified cases were already in an advanced stage of disease when first seen. That one-third of the infectious cases were in this condition emphasizes the importance of impressing upon the public the urgent need for obtaining early advice and treatment.

13. The public health importance of artificial pneumothorax work must also be emphasized at this point. Of the 8 cases now treated at the Oldbury Dispensary, 6 are now non-infectious.

14. Below is indicated the incidence in relation to the married and single state.

Married 39	M.	-	17	of whom 11 are positive.
	F.	-	22	,, ,, 15 ,, ,,
Single 37	M.	-	22	,, ,, 12 ,, ,,
	F.	-	15	,, ,, 7 ,, ,,

15. Of the 15 married women 12 were housewives. The increased incidence of tuberculosis among females between 15 and 35 has been noted for some years throughout the country and is associated with their increased absorption into industrial life with consequent greater danger of infection and an increased strain on their resistance.

16. From a review of the above factors it will be seen that no new factor has arisen which would account for the marked increased incidence of tuberculosis during 1933. Actually the increase is most likely due to a combination of factors, such as the enhanced activity of the usual underlying causes. That there is at present no increase in the virulence in the disease is suggested by the stability of the death rate, though it has to be seen whether the increased number of cases this year will be reflected by a higher death rate in 1934. In the meantime, the best course is to pursue the anti-tuberculosis work along lines which would tend to improve the health of the community as a whole.

17. Occasions arise when the practical support of the Council would be of help in dealing with individual cases and it is suggested that there be a permanent Committee of, say, the Medical Officer of Health of Oldbury, and the Chairman of the Health Committee, to whom cases can be referred when it is considered the home conditions need urgent investigation or where failure to carry out advice in treatment would be prejudicial to the health of the community or may affect public economy.

18. With regard to notifications of cases in which no action is to be taken by the Tuberculosis Officer, it is suggested that a special form be signed by the General Practitioner stating that the patient in question is in no way affecting milk etc., and that there is no other source of infection as far as he can ascertain.

*Dispensary Work, 1933.*

1. No of attendances	...	...	...	...	975
2. Average attendance	...	...	...	...	20.3
3. No. of contacts	...	...	...	...	167
4. No. of visits by Dr.	...	...	...	...	321
5. No. of visits by Nurse	...	...	...	...	2100
6. No. of X-rays	...	...	...	...	50
Artificial Pneumothorax work	...	8	{ 5 working 2 fit 1 maintaining general condition.		

S. DEANER,  
Tuberculosis Officer.